

APPLICATION FORM

Please Print Clearly

Student's Name _____ Male or Female _____ Grade in September _____
Last First Middle

Address _____ Phone # _____ Social Security # _____
Street City Zip

Place of Birth _____ City & State _____ Date of Birth _____ Age _____

Ethnic Origin (please check one)
Asian _____ Black _____ Hispanic _____ Multi-Racial _____ Native Alaskan/
American Indian _____ Native Hawaiian/
Pacific Islander _____ White _____

Date Entering St. Bartholomew Academy _____ Former School (incl. address) _____

Father's Name _____ Religion _____ U.S. Citizen? Yes / No

Occupation _____ Name, Address, Phone # of Employer: _____

Email Address; _____ Father's Cell Phone _____

Mother's Name _____ Maiden Name _____ Religion _____ U.S. Citizen? Yes / No

Occupation _____ Name, Address, Phone # of Employer: _____

Email Address; _____ Mother's Cell Phone _____

Marital Status: Married _____ Widowed _____ Separated _____ Divorced _____ Mother Remarried _____ Father Remarried _____

Where parents are divorced/separated who has legal custody of the child? _____

Religious Affiliation: Catholic: Yes / No St. Bartholomew Parishioner # _____

Other Catholic Parish (Name, Address, Parishioner #): _____

Baptism: Date/Name & Address of Church: _____

First Communion: Date/Name & Address of Church: _____

First Reconciliation: Date/Name & Address of Church: _____

Parent Signature: _____ Date: _____