



APPLICATION FOR OUR LADY OF PERPETUAL HELP SCHOOL STUDENT INFORMATION

Today's date: _____

This application is also available at www.ourladysschool.com.

Full Legal Name of Applicant

Last Name _____ First Name _____ Middle Name _____

Social Security Number _____ Grade in Fall, 2009 _____

Applicant's Home Address

Street _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Email _____

Birth date ___/___/___ Age _____ Birthplace _____ Ethnicity (Optional) _____

Religion _____ Current Parish or Worship Community _____

Baptism Date ___/___/___ in (Church) _____ (City) _____

First Communion Date ___/___/___ in (Church) _____ (City) _____

Is your child attending Religious Education Classes? _____ If yes, in what Parish? _____

_____ (City) _____

Present School: _____

School Address _____

Check where appropriate:

Live with both parents Live with Father Mother Deceased Other _____

Live with Mother Live with Guardian(s) Father Deceased _____

Parents married Parents Separated Parents Divorced _____

Father

Last Name _____ First Name _____ Religion _____

Father's Birthplace _____

Occupation _____ Name of Employer/Business _____ Work Phone _____

Employer Address

Street _____ City _____ State _____ Zip _____

Mother

Last Name _____ First Name _____ Religion _____

Mother's Birthplace _____

Occupation _____ Name of Employer/Business _____ Work Phone _____

Employer Address

Street _____ City _____ State _____ Zip _____

Financial Responsibility rests with: Both parents Father Mother Other State Name/Relationship of Other
