

**NEW STUDENT REGISTRATION FORM  
2020-2021**

Please complete one form per student

**Please Print**

Student's  
Last Name:

First:

Middle:

Address:

Gender:

City:

State:

Zip:

Date of Birth:

Place of Birth:

County of Residence:

Social Security #:

Full Name of Family with whom child resides:

Public School District of Residence:

**Religion of Child (please select)**

Catholic \_\_\_\_ Other \_\_\_\_

Specify \_\_\_\_\_

**Ethnic Group (please select)**

White \_\_\_\_ Black \_\_\_\_ Hispanic \_\_\_\_

Asian \_\_\_\_ Multi-Racial \_\_\_\_

American Indian \_\_\_\_ Pacific Islander \_\_\_\_

Please indicate any pertinent medical information:

Are you aware of any psychological, educational, and/or emotional concerns that would affect your child's academic success? Yes \_\_\_\_ No \_\_\_\_ **If yes, please provide documentation.**

Has your child been diagnosed with ADD or ADHD? Yes \_\_\_\_ No \_\_\_\_ **If yes, please provide documentation.**

New Student Registration Form continued

School student currently attends:

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Address:

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City/State/Zip:

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How many years attended?

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Grade level during 2019-2020:

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Has this child attended PREP?                      If yes, highest grade:

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Where:

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**If Catholic, please complete:**

Baptism:

Date

Name of Church

City

State

Communion:

Date

Name of Church

City

State

Confirmation:

Date

Name of Church

City

State

**If Catholic, please provide the following:**

- Birth Certificate (copy)
- Baptismal Certificate (even if baptized at St. Cornelius)
- Communion Certificate (if applying for grades 3-8)
- Confirmation Certificate (if applicable)