

Nouvel Catholic Central Schools

Student Application for Grades Y5 -12



Please return completed application to *Nouvel Catholic Central Schools, Attn: Admissions*
 2555 Wieneke Rd., Saginaw, MI 48603

Or apply online at www.NouvelCatholic.org/Apply

Applying for admission to:

**Nouvel Catholic Central Elementary
 & Middle School Y5 – 8**
 2136 Berberovich St.
 Saginaw, MI 48603-3603

Nouvel Catholic Central High School 9 – 12
 2555 Wieneke Rd.
 Saginaw, MI 48603-2863

When are you seeking enrollment? Immediately Fall Semester 20_____

Name of student _____			
Last Name	First Name	Middle Name	
_____		Male	Female
Date of Birth	Birthplace		

Home Address _____			
Street	City	State	Zip

Applicant resides with _____			
Name(s)		Relationship	

<i>If applicable (not required):</i>			
Religion _____	Parish/Church _____	Pastor _____	

Current School _____			
School Name	Current Grade	School phone	

School Address _____			
Street	City	State	Zip

Are you applying any other children to Nouvel Catholic Central Schools?: <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>Note: A separate application must be submitted for each child applying.</i>			

Schools previously attended <i>(Do NOT include present school)</i>			
School name	School address	School phone	Dates of attendance
_____	_____	_____	_____
School Name	School address	School phone	Dates of attendance
_____	_____	_____	_____

Custodial Parent/Guardian: Mr. Mrs. Ms. Dr. Other	Relationship to Applicant _____	

Last name	First Name	Middle name

Address _____		
Street	City	State Zip

Home Phone	Cell Phone	Email Address

Additional Legal Guardian:	Mr.	Mrs.	Ms.	Dr.	Other	Relationship to applicant _____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Additional Information
Why are you considering Nouvel Catholic Central Schools? _____
Please describe your child (i.e. likes, dislikes, interests, hobbies, etc.). Is there anything the school should know about your child?

Does your child have any special needs (i.e. specific learning challenges, previous testing, emotional concerns, gifted students, etc.)?
If yes, please indicate: _____

Required Documents: Please include the following with application:
Copy of most recent report card/transcript, attendance records and discipline records
If applicable: Individual Education Plan (IEP) & standardized test scores

I understand that failure to provide complete and accurate information may be cause for denial of admission or dismissal from the school.

Parent/Guardian Signature: _____ Date: _____

For questions or help on this application, please contact admissions@NouvelCatholic.org

FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE.

Date(s) of Meeting/Shadow/School Tour: _____
Date of Enrollment: _____ Official Start Date: _____ Date of Withdrawal: _____
Birth Certificate: _____ Student Information Sheet: _____ Health Records: _____
Transcript/Report Cards: _____ Payment Agreement Form: _____ Parish Commitment: _____
Admissions Signature: _____ Principal Signature: _____
Date: _____ Date: _____