



SAINT JOHN THE EVANGELIST SCHOOL

Pre-school Registration Form

321 North Market St., Logan, Ohio 43138, 740-385-2767

PROGRAM SELECTION: 2-5 day Program
Check Days Student will be Attending
Mon <input type="radio"/> Tues <input type="radio"/> Wed <input type="radio"/> Thur <input type="radio"/> Fri <input type="radio"/>

Student Information			
Full First Name:	Middle Name:	Last Name:	
Name Goes by:	Date of Birth:	Gender:	
Address:	City:	Zip:	
Home Phone #:	Birth City, State:	Grade Entering:	
SSN#:	Religion:	Parish:	
Race: (you are not required to answer this question)			
<input type="radio"/> American Indian/Native American	<input type="radio"/> Hispanic		
<input type="radio"/> Asian	<input type="radio"/> Multiracial		
<input type="radio"/> Black	<input type="radio"/> Native Hawaiian/Pacific Islander		
	<input type="radio"/> White		

Parent Information	
Father's Name	Mother's Name
Address:	Address:
City, State, Zip:	City, State, Zip:
Home Phone #:	Home Phone #:
Work Phone #:	Work Phone #:
Cell Phone #:	Cell Phone #:
Religion:	Religion:
Parish:	Parish:
Birth City, State:	Birth City, State:
Education:	Education:
Occupaton:	Occupaton:
Place of Employment:	Place of Employment:

Home Status							
(CHECK ALL THAT APPLY) The Child's Parents are:							
<input type="radio"/>	Married	<input type="radio"/>	Separated	<input type="radio"/>	Divorced	<input type="radio"/>	Mother Deceased
<input type="radio"/>	Single	<input type="radio"/>	Guardian	<input type="radio"/>	Other	<input type="radio"/>	Father Deceased
Fill out the following if it applies to the child's home status, divorced, separated, guardian or other.							
Name of Custodial Parent and Relationship:							
Do you wish school mailings to be sent to both parents? <input type="radio"/> Yes <input type="radio"/> No							
St. John the Evangelist School is required to have a copy of the custodial orders on file.							
Other (Parent-like) Adult - Father Home				Other (Parent -like) Adult - Mothers Home			
Name:				Name:			
Relationship:				Relationship:			
<input type="radio"/>	Step-parent			<input type="radio"/>	Step-parent		
<input type="radio"/>	Other			<input type="radio"/>	Other		

Needed for Registration	For Office Use Only (Please do not mark in this box)
<input type="radio"/> Birth Certificate	<input type="radio"/> Child's Medical Statement
<input type="radio"/> Social Security Card	<input type="radio"/> Custody Orders (if applicable)
<input type="radio"/> Parent Drivers License	
<input type="radio"/> Immunization Records	