



SAINT JOHN THE EVANGELIST SCHOOL

Kindergarten – Sixth Grade Registration Form
 321 North Market St., Logan, Ohio 43138, 740-385-2767

Previous Schools (If Applicable)

School	Grade Completed	Address of School

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 #:
Email:	Email:
Religion:	Religion:
Parish:	Parish:
Birth City, State:	Birth City, State:
Education:	Education:
Occupaton:	Occupaton:

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							

Sacraments											
			Date			Church			City and State		
Baptism											
Eucharist											
Confirmation											

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"/>	Baptismal Certificate				
<input type="radio"/>	Immunization Records					<input type="radio"/>	Previous School Paperwork (if applicable)				