



NEW STUDENT ENROLLMENT FORM

STUDENT INFORMATION:

Student Name: _____ / _____ / _____ **Preferred name :** _____
(Last) (First) (Middle)

Grade registering for: _____ **Birth date:** _____ **Gender:** ___ Male ___ Female

Ethnic Background: ___ Yes, Hispanic/Latino **Race:** (check all that apply)
___ No, not Hispanic/Latino
*Hispanic/Latino= a person of Cuban, Mexican, or other Spanish culture or origins, regardless of race.
___ White
___ Black/African American
___ American Indian/Alaskan Native
___ Native Hawaiian/Pacific Islander
___ Asian

What language did child first learn when he/she first talked? _____

What language does your child most frequently speak? _____

What language is spoken by your family most often at home? _____

SCHOOL PREVIOUSLY ATTENDED:

Address: _____

Phone: _____

PRIMARY HOUSEHOLD: (Parent/guardian student resides with)

Father/Guardian's Name: _____ / _____ / _____
(Last) (First) (Middle)

Mother/Guardian's Name: _____ / _____ / _____
(Last) (First) (Middle)

Home Address: _____

Home Phone: _____ **Cell Phone:** Mother- _____ Father- _____

Mailing Address: _____

Email Address: _____

School District you reside in? _____ **County you reside in?** _____

STUDENT RELIGION:

Religion: _____ **Parish:** _____

Date: _____ **Parish:** _____

Baptism: _____

Reconciliation: _____

Eucharist: _____