

ST. PAUL'S CATHOLIC SCHOOL
Information Form – Please Print

Student Information:

Registering for Grade _____		Public school student would attend	
Girl _____	Boy _____	Soc. Sec. # _____	
_____		_____	
Student - Last Name	First Name	Middle Name (Nickname)	
_____		_____	
Street Address	City	State	Zip Code
_____		_____	
Date of Birth	Place of Birth	Religion	
_____		_____	
Sacraments Received: Baptism(Catholic) _____ Baptism(Other) _____ Reconciliation _____ Holy Eucharist _____			

Parent Information:

_____		_____	
Father's - Last Name	First Name	Religion	
_____		_____	
Home Telephone	Cell Phone	e-mail	
_____		_____	
Father's Employer	Occupation/Title	Business Phone	
_____		_____	
Mother's – Last Name	First Name	Religion	
_____		_____	
Home Telephone	Cell Phone	e-mail	
_____		_____	
Mother's Employer	Occupation/Title	Business Phone	
_____		_____	
Please check any that apply:			
_____ Student lives with mother and father		_____ Father deceased	
_____ Student lives with mother		_____ Mother deceased	
_____ Student lives with father		_____ Parents divorced	
_____ Student lives with grandparents		_____ Parents separated	
_____ Student has legal guardian: Name _____			
Please Check your predominant ethnic background:			
_____ Black/African American		_____ Asian	
_____ American Indian		_____ Hispanic	
_____ Other (Please specify)		_____ Pacific Island/Hawaiian	
		_____ White	

Please be sure to complete the both sides of this form.

