



**ADMISSION APPLICATION**  
**KINDERGARTEN**

Date \_\_\_\_\_

☐ Full Day    ☐ Half Day (8-11:00am)

***Student Information***

Last Name \_\_\_\_\_ ☐ Male ☐ Female

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parish \_\_\_\_\_ Public School District Number \_\_\_\_\_

Birth Date \_\_\_\_\_ City/State \_\_\_\_\_

Birth Certificate No. \_\_\_\_\_

Baptism Date \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Baptismal Certificate Submitted: ☐ Yes ☐ No

Preschool Attended \_\_\_\_\_

Does your child have any **major** physical disabilities? ☐ Yes ☐ No

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

Does your child have an IEP or SSP? ☐ Yes ☐ No

Other pertinent information: \_\_\_\_\_

\_\_\_\_\_

Is your child current with all required immunizations? ☐ Yes ☐ No

**(over)**

### ***Family Information***

Father's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Religion \_\_\_\_\_

Birthplace \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Religion \_\_\_\_\_

Birthplace \_\_\_\_\_ Occupation \_\_\_\_\_

Main Email Address: \_\_\_\_\_

Marital Status: ☐ Married and Living Together

FATHER:

MOTHER:

Deceased Separated Remarried Divorced  
(circle one)

Deceased Separated Remarried Divorced  
(circle one)

Child Lives With \_\_\_\_\_

Name of Guardian (if applicable) \_\_\_\_\_

Guardian's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Guardian's Home Phone \_\_\_\_\_ Guardian's Cell Phone \_\_\_\_\_

Guardian's Business Phone \_\_\_\_\_ Guardian's Religion \_\_\_\_\_

Guardian's Birthplace \_\_\_\_\_ Guardian's Occupation \_\_\_\_\_

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### **Office Only**

**\$100 Nonrefundable Registration (All Families)**

**\$175 Book Fee Per Student (All Families)**  
**(Check #/Date Pd.)**