

St. John the Baptist Catholic School

983 Napa Street • Napa, CA 94559 • 707-224-8388 • FAX 707-224-0236

NEW STUDENT APPLICATION FOR 2010/2011

PLEASE PRINT (ONE FORM REQUIRED FOR EACH CHILD ENROLLING)

Date of Application: _____ Grade entering 2010/2011: _____

Child's Legal Name: _____ Gender: M ___ F ___

Home Address: _____
Last First Middle

City & Zip: _____ Home Phone: _____

Date of Birth: _____ City/State of Birth: _____

Religion: _____
Month Day Year If Catholic, Parish: _____

Date and Church of Baptism: _____

City and State (*Attach copy of certificate*) _____

Date and Church of First Communion: _____

City and State (*Attach copy of certificate*) _____

Do you have Internet access at home? _____
Yes No

Student Living with: Both Parents _____ Mother Only _____ Father Only _____

Mother/Stepfather _____ Father/Stepmother _____

Guardian: _____ Specify Relationship: _____

Has the child ever repeated a grade? Yes ___ No ___ If yes, which grade(s)? _____

School currently attending: _____

Grade: _____ Address: _____

City: _____ State: _____ Zip: _____

A determination of grade level placement for grades 1 - 8 will be made on the basis of past records and a screening (if necessary). Kindergarten students will be screened for school readiness.

FAMILY DIRECTORY:

The school publishes a Family Directory each year which includes names, addresses, home phone, cell phone, and email addresses of each parent/guardian. This information is for school use only. Your inclusion in this popular resource is optional. Please check one of the following:

- **Yes, please include us.**
- **No, we would prefer not to be included.**
- **Yes, please include us with the following exceptions:** _____

(Continue on reverse side)

PARENT/GUARDIAN INFORMATION
PLEASE PRINT

Natural Father's Name: _____

Religion: _____ Last _____ First _____ Middle _____
If Catholic, Parish: _____

Address: _____ City, State, Zip: _____

Home phone: _____ Cell phone: _____

Email: _____ Occupation: _____

Employer: _____ Work Phone: _____

Natural Mother's Name: _____

Religion: _____ Last _____ First _____ Middle _____
If Catholic, Parish: _____

Address: _____ City, State, Zip: _____

Home phone: _____ Cell phone: _____

Email: _____ Occupation: _____

Employer: _____ Work Phone: _____

Guardian or Step-Parent's Name: _____

Religion: _____ Last _____ First _____ Middle _____
If Catholic, Parish: _____

Address: _____ City, State, Zip: _____

Home phone: _____ Cell phone: _____

Email: _____ Occupation: _____

Employer: _____ Work Phone: _____

CONFIDENTIAL INFORMATION								
This information will be kept confidential and is required in order for St. John the Baptist Catholic School to receive Federal funding. No names will be disclosed.								
Ethnic Origin (check one)	African American	American Indian	Asian	Caucasian	Filipino	Latino	Pacific Islander	Multi-Racial
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language Spoken at Home:								
Home Public School District:								
Home Public School:								
# of Persons in Household:								
Income Level: <input type="radio"/> \$0 - \$18,889 <input type="radio"/> \$18,890 - \$25,327 <input type="radio"/> \$25,328 - \$31,765 <input type="radio"/> \$31,766 - \$38,203								
<input type="radio"/> \$38,204 - \$44,641 <input type="radio"/> \$44,642 - \$51,079 <input type="radio"/> \$51,080 - \$57,517 <input type="radio"/> \$57,518 - \$63,955 <input type="radio"/> \$over \$63,956								

**ADDITIONAL QUESTIONS FOR NEW STUDENTS
Fall 2010**

- Has your child ever been referred or tested for special learning or behavioral needs either privately or through the public school system?

When: _____

Referring agency or party: _____

- Why would you like your child to attend St. John's?

- How will you support your child's faith formation during his/her time at St. John's?

- For all students entering grades 5th through 8th - Question for the student to answer:
In a short essay, please describe someone you admire and explain why.

I have read and reviewed the information that I have provided and verify that it is correct.

Parent/Guardian signature _____ Date _____