

**POPE SAINT JOHN PAUL II CATHOLIC ACADEMY
ENROLLMENT APPLICATION**

Please circle: North or South Campus

Child's Name: _____ Gender: M F Entering Grade: _____

Address: _____ City: _____ Zip Code: _____

Place of Birth: _____ Date of Birth: _____
City State

School Last Attended: _____ Grade: _____ City: _____

Public School Child Would Attend: _____ District: _____

Child's Religion: _____ Home Parish: _____

Baptism Date: _____ Church/City: _____

Reconciliation Date: _____ Church/City: _____

First Communion Date: _____ Church/City: _____

Confirmation Date: _____ Church/City: _____

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SPECIAL NEEDS

1. Has this child been attending special education or Title I classes? Y N

2. Does this child have any special needs which the school should be aware of? Y N

If yes, please explain: _____

3. Does this child have an IEP/Accommodation Plan/504? Y N

4. Are there special circumstances about the child's home/school situation that the school should be aware of?

**PLEASE attach your response to #4 on a separate sheet of paper. PLEASE also attach a copy of this child's IEP/Accommodation Plan/ 504

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FAMILY INFORMATION

What is the primary language spoken at home? English Spanish Other: _____

What is the primary language this child speaks? English Spanish Other: _____

Is this child able to? (Please check all that apply) _____ Speak English _____ Read in English

_____ Understand English _____ Write in English

ETHNICITY

Is this child Hispanic/Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race?) **Choose ONLY ONE**

_____ No, not Hispanic/Latino _____ Yes, Hispanic/Latino

The question above is about ethnicity, not race. No matter which answer you selected, continue and respond to the question below by marking one or more boxes to indicate what you consider this child's race to be.

RACE

What is this child's race? Choose one or more.

- _____ American Indian or Alaska Native (A person having origins in any of the original people of North and South America, and who maintains tribal affiliation or community attachment.)
- _____ Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand, and Vietnam.)
- _____ Black or African American (A person having origins in any of the black racial groups of Africa.)
- _____ Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
- _____ White (A person having origins in any of the peoples of Europe, the Middle East, or North Africa.)

HOUSEHOLD INFORMATION

Child lives with: _____ Both parents _____ Mother _____ Father _____ Relative
 _____ Stepmother _____ Stepfather _____ Guardian _____ Other

If divorced, who has legal custody? _____ Is there joint custody? Y N

Name of person you have joint custody with? _____

If the custodial parent cannot be reached, may the school contact the non-custodial parent? Y N

Is there a protective order in place regarding this child? Y N

****Certified copies of custody agreements and protective orders MUST be attached to this form.**

Father/Guardian Name: _____ Religion: _____

Address: _____ Cell Phone: _____

Place of Birth: _____ Occupation: _____

Employer: _____ Work Phone: _____

E Mail: _____ Marital Status: _____

Mother/Guardian Name: _____ Religion: _____

Address: _____ Cell Phone: _____

Place of Birth: _____ Occupation: _____

Employer: _____ Work Phone: _____

E Mail: _____ Marital Status: _____

Custodial Parent/Guardian Signature: _____

Date: _____