



APPLICATION FORM

DATE: _____

APPLICATION FOR SCHOOL YEAR: _____

GRADE: _____

STUDENT INFORMATION:

Student _____

Family Last Name

First

Middle

Legal Last Name
(if Different)

Address

City

Zip

Home Phone

Cell Phone

Birthdate

Birthplace (City & State)

Male/Female

(Circle)

Religion

Date of Baptism

Church

City

School/Pre-School Currently Attending:

Name

City

Phone #

PARENT INFORMATION:

Father/Guardian _____

Family Last Name

First

Cell Phone#

Birth Date

Birthplace

Religion

Email

Occupation

Company Name/ Address

Phone#

Mother/Guardian _____

Maiden Name

First

Cell Phone#

Birth Date

Birthplace

Religion

Email

Occupation

Company Name/ Address

Phone#

Student resided with: Father _____ Mother _____ Stepfather _____ Stepmother _____ Other _____

If student lives with stepparent, please complete:

Name _____
Stepmother/Stepfather (Circle One)

Birth Date	Religion	Parish/Church
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Occupation	Company Name/ Address	Phone #
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Marriage:

Parents married in Catholic Church ? yes/no If Yes

Church/City _____

If no, where? _____

Mass Attendance:

What Church/Mass do you usually attend? _____

Are you enrolled in the Parish yes/no (Circle one)

Do you have any relatives who have attended The Catholic School of Visalia,
George McCann Memorial ?

Name	Relationship
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Name	Relationship
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