

St. Jude *The Apostle* School

STUDENT REGISTRATION FORM

- Pre-Kindergarten Half Day AM Half Day PM Full Day
- Gr. K-6, Grade in September _____ Today's Date: _____

STUDENT INFORMATION

Name:	Date of Birth:	
Gender:	Ethnicity: Hispanic Y/N	
Home Address:		
City:	State:	Zip:
Home Phone Number:	School District of Residence:	
Previous School Attended:	Parish Affiliation:	
Date of Baptism:	Parish:	City, State:
Date of First Communion:	Parish:	City, State:

PARENT/GUARDIAN INFORMATION

Father's Name:	Employer:	
Home Address:		
City:	State:	Zip:
Home Phone Number:	Work Phone Number:	
Cell Phone Number:	Other Phone Number:	
E-mail Address:		
Religion:	Marital Status:	
Mother's Name:	Employer:	
Home Address:		
City:	State:	Zip:
Home Phone Number:	Work Phone Number:	
Cell Phone Number:	Other Phone Number:	

E-mail Address: _____

Religion: _____

Marital Status: _____

Maiden Name: _____

EMERGENCY CONTACT & HEALTH INFORMATION

Please list three (3) additional contacts, in order of desired contact, to be called if parent/guardian cannot be reached:

Emergency Contact #1: _____ Phone Number: _____

Relationship to Student: _____

Emergency Contact #2: _____ Phone Number: _____

Relationship to Student: _____

Emergency Contact #3: _____ Phone Number: _____

Relationship to Student: _____

Student's Primary Doctor: _____ Phone Number: _____

Hospital Preference: _____

Early Childhood/Pre-K Only: Is this child potty trained? Yes No

STUDENT SERVICESDoes this student have an IEP? Yes NoDoes this student have a 504 Plan? Yes No

If yes, which school district is responsible for preparing it? _____

*Please provide a copy of this plan to the school office.***LEGAL ALERT**

Who has legal custody of this student? _____

Is anyone legally barred from seeing this student? Yes No

If yes, who? _____ Relationship to Student: _____

*Court documentation and physical description must be provided to the school office.***FOR OFFICE USE ONLY**

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|--|---|---|--|
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Immunization Records | <input type="checkbox"/> Release of Records | <input type="checkbox"/> Baptismal Certificate |
| <input type="checkbox"/> Permission to Publish | <input type="checkbox"/> Internet Agreement | <input type="checkbox"/> Transportation Request | <input type="checkbox"/> Photo Release |

Registration Fee

Tuition Agreement

PowerSchool Entry

Permanent Record Card

1/2016