

ST. BRIGID CATHOLIC SCHOOL

APPLICATION FOR ADMISSION

FOR GRADE _____

312 Fairground Rd., Xenia, Ohio 45385

SCHOOL YEAR _____

937-372-3222 www.stbrigidxenia.org

CHILD'S FULL NAME _____ TELEPHONE _____
(Last) (First) (MI)

ADDRESS _____ CITY/STATE/ZIP _____

TELEPHONE 1. _____ 2. _____

FAMILY EMAIL ADDRESS (required for school communication) _____

DATE OF BIRTH _____ PLACE OF BIRTH _____ RELIGION _____ GENDER: M F

ETHNIC BACKGROUND (Required – State Reporting Purposes) Please circle: White Black Hispanic Asian Multi-Racial American Indian

SCHOOL TRANSFERRING FROM (Grades 1-8) _____ PRE-SCHOOL ATTENDED (K) _____

SPECIAL NEEDS Circle all that apply: LD ADD ADHD Speech/Language Physical Other (explain) _____

Current IEP/ISP? No Yes (If yes, copy of most current IEP/ISP and ETR required with Admission Application)

SACRAMENTS: DATE RECEIVED CHURCH NAME & ADDRESS (Certificates Required with Admission Application)

BAPTISM _____

FIRST COMMUNION _____

CONFIRMATION _____

PERMISSION FOR STUDENT PHOTO & PUBLICATION PARTICIPATION: I GIVE I DO NOT GIVE St. Brigid School permission to take my child's picture. I understand that it may appear in school sanctioned/sponsored publications (i.e. advertising brochures, school newsletters, public print (including newspapers), video tape, and the school web site.

Please complete the other side

FATHER'S INFORMATION: NAME _____ Occupation _____

ADDRESS (if different from child) _____ WORK/CELL PHONE _____

MARITAL STATUS: Married Divorced Widowed Single RELIGION _____ HOME PARISH or CHURCH _____

MOTHER'S INFORMATION: NAME _____ MAIDEN _____ Occupation _____

ADDRESS (if different from child) _____ WORK/CELL PHONE _____

MARITAL STATUS: Married Divorced Widowed Single RELIGION _____ HOME PARISH or CHURCH _____

*For all two-household families (divorced, separated, or single parents) St. Brigid School requires a copy of the most current **CUSTODY AGREEMENT/ORDER** to be kept in the student's confidential file. Due at the time of application for admission. Custody information portion **only** is required. NO visitation schedules or financial information is requested. Please also complete the contact information below.

NON-RESIDENTIAL PARENT NAME _____ PHONE NUMBER _____

HOME ADDRESS _____
Street Address City State Zip

FOR GUARDIAN OTHER THAN PARENT: (Copy of Guardianship order is required)

Name _____ Relationship _____

ST. BRIGID SCHOOL AUMNI: NAME & YEAR GRADUATED _____

WHERE DID YOU LEARN ABOUT ST. BRIGID SCHOOL? Parish Bulletin Friends Family School Mailing Website Other _____

FOR SCHOOL USE ONLY: ADMISSTION APPLICATION DATE _____ PARISHIONER _____ NON-PARISHIONER _____

REGISTRATION FEE: CASH/CHECK # _____ BIRTH CERTIFICATE _____ SACRAMENT CERTIFICATE _____ RECORDS RELEASE FORM _____