

## **ST. BRIGID SCHOOL APPLICATION FOR ADMISSION**

Please complete ALL sections of this form and submit all required documents with application form.

APPLYING FOR GRADE \_\_\_\_\_ SCHOOL YEAR \_\_\_\_\_

### **STUDENT INFORMATION**

**CHILD'S FULL NAME** \_\_\_\_\_  
(Last) (First) (Middle) (Preferred First Name)

**DATE OF BIRTH** \_\_\_\_\_ **PLACE OF BIRTH** \_\_\_\_\_  
(Month / Day / Year)

**CHILD'S RELIGION** \_\_\_\_\_ **GENDER**<sup>1</sup> M or F

**CHILD'S SOCIAL SECURITY or PASSPORT #** XXX-XX-\_\_\_\_\_  
Original Document Required Social Security # OR Passport # / Country

**ETHNICITY / RACE**<sup>1</sup> (Circle ALL that apply)

*Asian Black Hispanic Native American/Alaskan Native Hawaiian/Pacific Islander White Multi-racial*

**STUDENT'S HOME ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **PRIMARY PHONE #** \_\_\_\_\_

**STUDENT LIVES WITH:**  Both natural or adoptive mother and father  Mother only  Father only  
 Mother and stepfather  Father and stepmother  Grandparent  Legal guardian (not relative)  
 Other (Explain) \_\_\_\_\_

**PARENT EMAIL ADDRESS** (Required for school communication) \_\_\_\_\_

**PUBLIC SCHOOL DISTRICT OF RESIDENCE**<sup>1</sup> \_\_\_\_\_

#### **STUDENTS APPLYING FOR GRADES 1-8:**

School Transferring From \_\_\_\_\_

Reason for Transfer \_\_\_\_\_

**SPECIAL NEEDS: Any special needs must be indicated below and a copy of the current IEP/ISP and ETR, 504 Plan, or any other special accommodation plan must be submitted with this admission application.** Please give information on any health issues or other concerns on a separate sheet and attach to this application.

Does this child have a current IEP/ISP or 504?  No  Yes If yes, specify services below.

My child is currently receiving the following:  Speech Therapy  Occupational Therapy  Physical Therapy

**SACRAMENTS (Certificates Required)** Date received and church name, city and state

BAPTISM \_\_\_\_\_

FIRST COMMUNION \_\_\_\_\_

CONFIRMATION \_\_\_\_\_

**CHECK HERE** if you are planning to apply for a new Ohio EdChoice scholarship or transfer an existing EdChoice scholarship.

<sup>1</sup>Required for State Reporting Purposes

**FAMILY INFORMATION**

**FATHER'S INFORMATION:** NAME \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_  
RELIGION \_\_\_\_\_ HOME PARISH or CHURCH \_\_\_\_\_  
MARITAL STATUS \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
HOME ADDRESS (if different than child) \_\_\_\_\_

**MOTHER'S INFORMATION:** NAME \_\_\_\_\_ MAIDEN NAME \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_  
RELIGION \_\_\_\_\_ HOME PARISH or CHURCH \_\_\_\_\_  
MARITAL STATUS \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
HOME ADDRESS (if different than child) \_\_\_\_\_

**PROOF OF CUSTODY**

**For all two-household families** (divorced, separated, or single parents) **and guardianship situations, St. Brigid School requires a copy of the most current CUSTODY AGREEMENT AND COURT ORDER** to be kept in the student's confidential file. Due at the time of application for admission, this paperwork is required to confirm the enrolling adult's legal right to enroll the student in school. Custody information portion only is required. No visitation schedule or financial information is requested. Enrollment cannot be completed without proof of custody.

**PARENTS WHO ARE ST. BRIGID SCHOOL ALUMNI:**      NAME AND YEAR GRADUATED  
\_\_\_\_\_

**CHILD'S SIBLING(S) NAMES AND AGES**  
\_\_\_\_\_

**STUDENT PHOTO & PUBLICATION PARTICIPATION:**

**I give permission**     **I do not give permission** for St. Brigid School to use my child's picture in school sanctioned/sponsored publications such as school newsletters, school websites, advertising brochures and/or public communications (including newspapers and television.)

**WHERE DID YOU LEARN ABOUT ST. BRIGID SCHOOL?**

*PARISH BULLETIN    FRIENDS    FAMILY    SOCIAL MEDIA    WEBSITE    SCHOOL MAILING*  
*OTHER* \_\_\_\_\_

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**FOR SCHOOL USE ONLY**

Registration Fee Paid (Cash/check #) \_\_\_\_\_  
 Parishioner     Non-Parishioner  
Birth Certificate \_\_\_\_\_

Admission Application Date \_\_\_\_\_  
Sacrament Certificates \_\_\_\_\_  
Social Security/Passport \_\_\_\_\_  
Records Release Form \_\_\_\_\_