

HOLY SPIRIT SCHOOL APPLICATION 2013

	Last		First		Midale			13	Application Date:	
Child's Name:							Male Female	. 🗆	Applying for (Grade:
Birthdate (M/	/D/Y):		Birthplace	:		Ethnicity:			Grade(s) of Sibling(s):	
Address:				City:	Zip:		Home Phone:		L	
Current Pre-school/Elementary School:							Email:			
					FAMILY REC	<u> </u>	Referred By			
Parish:				Registered:	Yes No	Weekly Enve	-	o 🗌		
Holy Spir	it Alur			Bilingual?			SES?)			
	Last	<u>FATHE</u> First	<u>R</u> Middle	e V	<u> </u>	<u>MOTHER</u> First	Middle	Last	GUARDIAN First	Middle
Full Name:	Lust	T H St	IVIII I	11.	Turden Eust Manie	THSt	Wilde	Lust	11130	- Iviiuuic
Birthplace:										
Religion:										
Occupation:										
Work/Cell Ph:										
Marital Status:										
					ORD OF SACRAN		IVED			
	BAPTISM			HOLY EUCHARIST			RECONCILIATION		CONFIRMATION	
Date:										
Church:										
City/State:										
			1_		IMMUNIZATIO	N RECORDS				
PolioDates: 1.	•	2.	3.	4.	5.	He	patitis B Series:			
DTP: 1.		2.	3.	4.	5	He	patitis A Series:			
MMR: 1.	•	2.		TdBOOS	TER:		Varicella:		TBSKIN TEST (-/+)	•
							ivities/events, an	d attend	licies, procedures, promp ance at Saturday/Su	nday Mass
FATHER'S S	IGNATU:	RE:			<u>-</u>	For Office Us			Yes No Cum. Req:	
MOTHER'S SIGNATURE:										
GUARDIAN'S SIGNATURE:						FID: PS Log-in Sent:Yes No HSSAPP rev 12.04.12				