Saint Patrick SUCCEED Academy ENROLLMENT APPLICATION 2011-2012 SCHOOL YEAR

Date	Grade Entering		
Child's Legal Name			
Male l	First	Mid	dle
Address		Home Phone (
City	State	ZIP	
Birth Date	Birth	Place	
Religion: Catholic 1 Parish:		0	
Baptism	Reconciliation	First Communion	Confirmation
Date:			
Church:			
City, State:			
Name of last school attendedPhone Number		ax Number	
Student Ethnicity: Native America Pacific Islande	an Asian r White	Black Other:	
First language learned: Primary language spoken at ho	English Spanish Some: English S	Other: Specif	y r: Specify
Mother's Name		Religion	
Occupation	Business Phone	Cell Pho	one
Father's Name		Religion	
Occupation	Business Phone	Cell Ph	one
Student Living With: Both Pa	rents Mother	Father Other	er
Parent/Guardian Signature			

Required Documents for New Students:

Copy of the last report card if your child	l is transferring from another school			
Copy of Official Birth Certificate	Copy of Baptismal Certificate (For Catholics Only)			
Copy of child's immunization record				
Report of Health Examination for School Entry (K, 1st)				