## APPLICATION FOR ADMISSION SCHOOL YEAR 2009-2010

## St. Dominic School

Applying for grade	Date of Application	<u> </u>			
Name of Student		MF			
Home AddressStreet					
Street Home Phone	City	Zip			
Date of Birth	Place of Birth				
Applicant's Religious Affiliation	1				
Baptism Date	Church				
1st Communion Date	Church				
Presently enrolled at					
Phone number Ad		Grade			
Has applicant ever repeated a gra	ade? Yes No Whic	ch gr.			
Has applicant had learning probl	lems identified? No Yes	What was the nature			
of the learning problem?					
Why do you want your child/chi					
FATHER	MOTHER (Maiden	Nama)			
	· ·	,			
Name					
Address	Address				
Employer	Employer				
Employer Ph. #	Employer Ph. #				
Occupation	Occupation				
Religious Affiliation	Religious Affiliation				

Applicant lives with	Both Parents	Mother	Father	Guardian
List other children attend	ing St. Dominic's _			
List other children apply	ing to St. Dominic's			
Are you a registered and	contributing membe	er of St. Domin	ic's Church?	
Registration number				
Are you a registered men	nber of another paris	sh? Nam	e of parish	
Please attach a copy of: I	Birth Certificate Sh	ot Records Ba	ptismal Cert	ificate
For grades 1-8 please atta Please give Confidential Thank you for your appli \$25.00 non-refundable a	Teacher Report and cation to St. Domini	Release & Cor	sent form to	current teacher.
Once your application a our waiting list. You wi Applications must be re	ll be notified when	-	•	-
Signature of Parent			Date	
A limited amount of fina demonstrated need for as				