



ENROLLMENT APPLICATION

TODAY'S DATE: _____

CHILDS NAME Last First Middle			DATE OF BIRTH Month Day Year <i>Please note that the child you are applying for MUST be at least 3 years old as of December 1st, 2009 and toilet trained in order to attend.</i>		
ADDRESS No. and Street City State ZIP				SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	
HOME PHONE				PLACE OF BIRTH City State	

WHO IS THE CHILD LIVING WITH? (PLEASE CHECK ALL CORRECT STATEMENTS) :

Natural father and mother
 Mother and step-father (Natural father's name) _____
 Father and step-mother (Natural mother's name) _____
 Mother only, father is [] separated [] divorced [] deceased
 Father only, mother is [] separated [] divorced [] deceased
 Grandparent [] Mother's mother [] Mother's father [] Father's mother [] Father's father
 Guardian (Please list name and relationship) _____
Name Relationship

MAY WE HAVE THE FOLLOWING INFORMATION ON THE PEOPLE WITH WHOM THE CHILD LIVES

Father (or male guardian's) Name Last First Middle		Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	Religion	Place of Birth City State
Name of Employer		Occupation		
Business Address		Business Phone		
Mother's (or female guardian's) Maiden Name Last First Middle		Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	Religion	Place of Birth City State
Name of Employer		Occupation		
Business Address		Business Phone		

PLEASE LIST THE NAMES AND RELATIONSHIPS OF ALL OTHER ADULTS AND CHILDREN LIVING WITH THE CHILD:

IS YOUR CHILD BAPTIZED? Yes No Religion _____

BAPTISM DATE _____ Place _____ Church _____ Address _____ City _____ State _____

Does your child currently attend a child care center or preschool? If so,

NAME OF SCHOOL _____

NAME OF DIRECTOR _____ PHONE NUMBER: _____

PLEASE COMPLETE ALL THE QUESTIONS LISTED ON THIS SIDE OF THE FORM.
MISSING OR INACCURATE INFORMATION MAY ELIMINATE YOUR APPLICATION FROM CONSIDERATION!

DO YOU HAVE ANY CHILDREN ALREADY ATTENDING ST. THOMAS MORE SCHOOL? IF YES, PLEASE LIST THEIR NAMES AND CURRENT GRADES

IF YOU ARE A CATHOLIC, ARE YOU REGISTERED IN A PARISH? IF YES, WHICH ONE?

The Archdiocesan Board of Education requires us to ask you the race of this child. Check appropriate box on the right

- Native American African American Multi-racial Chinese
 Japanese Korean Other Asian Filipino
 Hispanic Other white

PLEASE LIST BRIEFLY ALL THE REASONS WHY YOU ARE APPLYING TO ST. THOMAS MORE PRESCHOOL

IN ADDITION TO THIS APPLICATION, DO YOU HAVE ANY OTHER CHILD(REN) IN YOUR HOUSEHOLD NOT NOW ENROLLED AT ST. THOMAS MORE WHO WILL BE IN ANY GRADE, KINDERGARTEN THROUGH EIGHTH, DURING THIS COMING SCHOOL YEAR? IF YES, PLEASE LIST THE NAME(S) AND TELL US WHICH SCHOOL THE CHILD(REN) WILL BE ENROLLED NEXT YEAR.

IF SOMEONE RECOMMENDED OR REFERRED YOU TO ST. THOMAS MORE PRESCHOOL TO YOU, WE WOULD LIKE TO KNOW WHO THAT PERSON IS SO WE CAN THANK THEM. IF YOU HAVE SOME CONNECTION WITH THE SCHOOL, WE WOULD LIKE TO CONSIDER THAT INFORMATION TOO. PLEASE PROVIDE THAT INFORMATION HERE.

HAS THE APPLICANT ALREADY BEEN ACCEPTED, REFUSED, OR WAIT LISTED BY ANOTHER PRESCHOOL? PLEASE PROVIDE SPECIFIC INFORMATION.

IN ADDITION TO THE BASIC INFORMATION ALREADY PROVIDED ON THE APPLICATION, PLEASE USE THE SPACE HERE AND ON TO GIVE US ADDITIONAL INFORMATION YOU THINK WE MIGHT NEED OR WANT CONCERNING THIS APPLICANT.