



Application For Enrollment

(Application does not guarantee acceptance. You will be notified of admission status.)

Date of Application: _____ For School Year _____ - _____ Grade Entering _____

Briefly explain your reasons for seeking admission to Holy Spirit School: _____

How did you learn about Holy Spirit School? _____

SECTION A: Student Information			
Child's Name:	(last)	(first)	(middle)
Address:	(street)	(city)	(state) (zip)
Phone:	Religion*:		(<i>*If Catholic, please complete Section D</i>)
Date of Birth:	/ /	Place of Birth:	(city) (state) (country)
Child's Current School**:	Grade:		(<i>**If applicable, please complete Section E</i>)

SECTION B: Parent/Guardian Information			
PART I: <input type="checkbox"/> Father <input type="checkbox"/> Guardian (<i>if guardian, relationship to child</i>):			
Name:	(last)	(first)	(middle)
Home Address:	(street)	(city)	(state) (zip)
<input type="checkbox"/> same as above			
Phone:	Religion:		
<input type="checkbox"/> same as above			
Place of Employment:	Occupation:		Phone:
Address:	(street)	(city)	(state) (zip)
PART II: <input type="checkbox"/> Mother <input type="checkbox"/> Guardian (<i>if guardian, relationship to child</i>):			
Name:	(last)	(first)	(middle)
Home Address:	(street)	(city)	(state) (zip)
<input type="checkbox"/> same as above			
Phone:	Religion:		
<input type="checkbox"/> same as above			
Place of Employment:	Occupation:		Phone:
Address:	(street)	(city)	(state) (zip)
PART III: (<i>if applicable, please complete</i>) <input type="checkbox"/> Father Deceased <input type="checkbox"/> Mother Deceased			
<input type="checkbox"/> Parents Separated* <input type="checkbox"/> Parents Divorced* <i>*Custody (Mother/Father/Joint):</i>			

SECTION C: Sibling Information

Name	School Attending	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION D: Religious Record

PART I: Family's Registered Parish*: _____ *(*if applicable, please complete Parish Certification)*

PART II: Sacramental Record

Baptism: (church) _____ (city) _____ (state) _____ (country) _____ Date: / /

First Communion: (church) _____ (city) _____ (state) _____ (country) _____ Date: / /

Confirmation: (church) _____ (city) _____ (state) _____ (country) _____ Date: / /

SECTION E: School Record (required for transfer students only)**PART I: Previous Schools (most recent first)**

School Name: _____ Dates Attended: (from) _____ (to) _____

Address: (street) _____ (city) _____ (state) _____ (zip) _____

Reason for Leaving: _____

School Name: _____ Dates Attended: (from) _____ (to) _____

Address: (street) _____ (city) _____ (state) _____ (zip) _____

Reason for Leaving: _____

PART II: Special Services received from most recent school attended (check all that apply):

ESL Speech LD Chapter I Psychologist Outside Counseling

The following information will be required to complete the application process, but is not required with submission of this Application For Enrollment form.

- | | |
|--|---|
| <input type="checkbox"/> Copy of Baptismal Certificate (if applicable) | <input type="checkbox"/> A Recent Picture of Child |
| <input type="checkbox"/> Copy of Birth Certificate (if no Baptismal Certificate) | <input type="checkbox"/> Parish Certification (if applicable) |
| <input type="checkbox"/> Health Assessment/Proof of Immunization | <input type="checkbox"/> Family Composition Form |
| <input type="checkbox"/> Copy of School Records (if Section E applies) | <input type="checkbox"/> Emergency Contact Form |

Parent/Guardian Signature: _____

Holy Spirit School is committed to the admission and education of students based upon their qualifications and abilities. In accordance with this policy, and in accordance with Connecticut and federal law, Holy Spirit School does not discriminate regarding an applicant or student's sex, race, color, national origin, ethnicity, religion, disability, or any other legally protected status.