

ST. LINUS SCHOOL APPLICATION FOR ADMISSION

Date: _____

Grade Entering: _____

PUPIL INFORMATION

Last Name:	First Name	Middle	Sex	Birthdate	Birthplace
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FAMILY INFORMATION

Fathers First Name	Middle Name	Last Name	Birthplace	Religion	Occupation	Marital Status	Deceased
Mothers First Name	Maiden Name	Last Name	Birthplace	Religion	Occupation	Marital Status	Deceased
Guardian First Name	Middle Name	Last Name	Birthplace	Religion	Occupation	Marital Status	Deceased
Legal Stepparent First Name	Middle Name	Last Name	Birthplace	Religion	Occupation	Marital Status	Deceased

RESIDENCE INFORMATION

Address	City	Zip Code	Phone No.
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DEVELOPMENTAL INFORMATION

Baptism Date	Church	City	State	Verifying Signature
First Communion Date	Church	City	State	Verifying Signature
Confirmation Date	Church	City	State	Verifying Signature

1. Which parish church do you attend for Mass? _____ Parish _____ City _____ St. Linus Church envelope # _____

2. School child is entering from: _____ School _____ City _____

3. Other children applying: Grade _____ Grade _____ Grade _____ Do you have children presently enrolled in St. Linus School? ___ Yes ___ No

4. Name of parent who can be contacted during business hours: _____ Business Phone: _____

5. Is any member of the family a past pupil(s) of St. Linus School? _____ Name(s) _____ Relationship _____

6. For archdiocesan census information - ethnic origin

(Please check one) American Indian Caucasian
 Asian Hispanic
 African American Other
 Filipino

For Office Only:

Application Fee Reg.Fee
 Test Position
 interview Application Mtg.
 Green Form