St. Clare of Assisi Catholic School
Kindergarten Application for Enrollment 2015 – 2016

Our Kindergarten Program is an all day Program

A Copy of Child's Birth Certificate, Baptismal Certificate and a $45.00 Application fee Must Accompany Application

CHILD'S NAME_____
First Middle Last Nickname

ADDRESS_____ **PHONE** _____
Street City Zip

BIRTHDATE_____ **SEX**_____ **EMAIL#1**_____ **EMAIL#2**_____

FATHER'S NAME_____ **RELIGION**_____
First MI Last

OCCUPATION_____ **BUS. PHONE**_____ **CELL PHONE** _____

MOTHER'S NAME_____ **RELIGION**_____
First MI Last Maiden

OCCUPATION_____ **BUS. PHONE**_____ **CELL PHONE** _____

MARITAL STATUS: Married_____ **Single**_____ **Widowed**_____ **Divorced**_____ **REGISTERED MEMBER OF ST. CLARE PARISH:** ____**Yes** ____**No**

CHILD RESIDES WITH: Both Parents___ **Mother Only**___ **Father Only**___ **Other**___ **(Please Explain)**_____

LEARNING OR BEHAVIORAL REFERRAL/DIAGNOSIS: __**Yes** __**No** **PREVIOUS (PRE) SCHOOL ATTENDED:** _____

PUBLIC SCHOOL DISTRICT_____ **NEIGHBORHOOD ELEMENTARY SCHOOL**_____

PARENT SIGNATURE_____

Office Use Only:
Date of Application_____ **Enroll. Fee**_____ **Book Fee**_____ **Birth Cert.**_____ **Bapt. Cert.** _____ **Cust.** _____ **FACTS**_____