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St. Pius X Catholic School

Enrollment Application for 20____ - 20____

Applicant Information – Please Print Legibly			
Student Name			
First, Middle & Last			
Preferred First Name			
Gender	Male Fem	nale	
Date of Birth			
Religion			
If not a parishioner of St. Pius X, do you plan to register?	Yes No		
Current Grade			
Desired Grade			
Current School			
Does applicant have an IEP or	Yes No_		
receive resource help?			
	If yes, please provide IEP, testing o	documentation and last two years report cards and ISTEP testing.	
Parent and Guardian Information			
Father:		Mother:	
Title: (Mr. / Dr.) First	Last	Title (Mrs./Ms./Dr.) First Last	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Home Phone:Cell Phone:		Home Phone:Cell Phone:	
Email:		Email:	
Religion:Parish:		Religion:Parish:Parish:	
Applicant lives with: Bo	oth Parents Mother	Father Guardian	
Please send this application to St. Pius X Catholic School with your non-refundable \$100.00 application fee (per child). Receipt of the application fee ensures that the application will be processed; however we cannot guarantee that every child will be accepted to the school. First priority will be given to active parishioners of St. Pius X Catholic Church and to those with siblings already attending the school. We will contact you once determinations about enrollment have been made.			
Grade 1 – 8 Applicants Please P	rovide:	Kindergarten Applicants Please Provide:	
Copies of child's last <u>two years</u> report cards, ISTEP testing and IEP if applicable.		A copy of applicant's birth certificate and a copy of baptismal certificate (not required if baptized at St. Pius X)	
For Office Use Only:			
Application Fee Paid:	Check Number:	Date:Initials:	