

GOOD SHEPHERD CATHOLIC SCHOOL
2727 Mattison Lane, Santa Cruz, CA 95065

(\$55.00 processing fee
due with this application.)



Preschool – 8th SCHOOL APPLICATION FORM
DIOCESE OF MONTEREY

Date of Application _____

Desired Enrollment Date _____

Entering Grade _____

STUDENT INFORMATION

Name _____
Last First Middle (Nickname)

Sex : M F

Home Address _____
Street & Number City Zip Code

Telephone (____) _____ Religion _____

Place of Birth _____ Date of Birth _____
City State/Country

Please check the one that applies to the child:

Ethnic Background

- Hispanic
- White
- Black
- Asian
- Native American
- Multi-Cultural

Living with:

- Both Parents
- Father
- Mother
- Legal Guardian
- Foster Parent
- Shared Custody
- Other (Specify): _____

Language Spoken in the Home

- English
- Other (Specify): _____

Student's First Language(s)

- English
- Other (Specify): _____

Parental Information

- Father:** Single
 Married
 Divorced
 Remarried
 Deceased

- Mother:** Single
 Married
 Divorced
 Remarried
 Deceased

Citizenship U.S. Citizen Non-U.S. Citizen (Specify): _____

FAMILY RECORD

Father's Name

Last First Middle

Address _____
Street & Number City State Zip

Home # (____) _____ Business # (____) _____ Cell # (____) _____

Occupation _____
Name of Business Type of Work

Business Address _____
Street & Number City State Zip

Place of Birth _____ U.S. Citizen Yes No Religion _____

Mother's Name

Last First Middle

Address _____
Street & Number City State Zip

Home # (____) _____ Business # (____) _____ Cell # (____) _____

Occupation _____
Name of Business Type of Work

Business Address _____
Street & Number City State Zip

Place of Birth _____ U.S. Citizen Yes No Religion _____

[If child not living with parent(s)]:

Legal Guardian's Name

Last _____ First _____ Middle _____
 Address _____
 Street & Number _____ City _____ State _____ Zip _____
 Home # (____) _____ Business # (____) _____ Cell # (____) _____
 Occupation _____
 Name of Business _____ Type of Work _____
 Business Address _____
 Street & Number _____ City _____ State _____ Zip _____
 Relationship to Child _____

MISCELLANEOUS INFORMATION

OTHER FAMILY MEMBERS WHO ARE ATTENDING/HAVE ATTENDED THE SCHOOL

Name	Dates	Name	Dates
_____	_____	_____	_____
_____	_____	_____	_____

RECORD OF SACRAMENTS

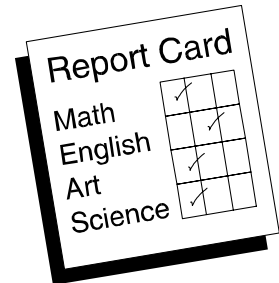
	<u>BAPTISM</u>	<u>FIRST RECONCILIATION</u>	<u>FIRST EUCHARIST</u>
Date	_____	_____	_____
Church	_____	_____	_____
City	_____	_____	_____

Name of parish, church or temple family currently attends _____ City _____ Registered? (Yes/No) _____

PREVIOUS SCHOOLING

List all school(s) previously attended, including Preschool through current year.

<u>Grade(s)</u>	<u>Name of School</u>
_____	_____
_____	_____
_____	_____



- Public School District where student currently lives _____

- HAS CHILD RECEIVED SPECIALIZED EDUCATIONAL TESTING? ____ Yes ____ No. If yes, explain:

- DOES CHILD CURRENTLY HAVE AN IEP? ____ Yes ____ No
- HAS CHILD BEEN A RECIPIENT OF SPECIALIZED SERVICES ON OR OFF THE SCHOOL SITE? ____ Yes ____ No
- IS CHILD CURRENTLY ENROLLED IN HONORS OR GATE PROGRAM? ____ Yes ____ No

REASON(s) FOR APPLYING TO GOOD SHEPHERD CATHOLIC SCHOOL
