

PRE-PRIMARY APPLICATION FOR ADMISSION

(Please print or type.)

Application Date: _____ Applying for Grade: _____ For the Fall of: _____

APPLICANT

Applicant's Name: _____
First Middle Last

Home Address: _____
City State Zip Code

Home Phone: _____ Fax: _____

E-mail: _____ Date of Birth: _____

Citizenship: _____ Place of Birth: _____

Religion: _____ Social Security Number: _____

Full Day 5 Days Per Week Three Days Per Week Mornings Only

Selected Days (Please Indicate) Monday Tuesday Wednesday Thursday Friday

Has the applicant had any other daycare or nursery school experience? Yes No
If yes, please give a brief explanation.

Is the applicant potty trained? Yes No

LEGACY

Family members who have attended Sacred Heart schools:

Name	Relationship	Years	School
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Name	Relationship	Years	School
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SIBLINGS

Please list the applicant's siblings.

Name	Age	Current School
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Name	Age	Current School
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Name	Age	Current School
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Name	Age	Current School
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GRANDPARENTS

Paternal Grandparents' Names: _____

Home Address	Phone
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Maternal Grandparents' Names: _____

Home Address	Phone
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REFERENCES

Please provide two references.

Name	Phone
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Name	Phone
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FINANCIAL RESPONSIBILITY

Please indicate who is financially responsible for the education of this child:

Name	Relationship
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PARENT ESSAYS

Please share with us a candid assessment of your daughter. What are her strengths and limitations? What should we know about her that we might not otherwise learn through the application process?

Why do you wish for her to attend the Academy of the Sacred Heart?

The Academy commits to educate its students to: a personal and active faith in God, a deep respect for intellectual values, a social awareness that impels to action, the building of community as a Christian value, and personal growth in an atmosphere of wise freedom. How might these goals address the hopes you have for your daughter?

APPLICATION FEE AND SIGNATURE

A \$40 NONREFUNDABLE APPLICATION FEE SHOULD ACCOMPANY THIS APPLICATION FORM.

Signature of Parent or Guardian

Date