



APPLICATION FOR GRADE _____
SCHOOL YEAR 2018-2019
Processing Fee \$40.00

St. Basil's School

Catholic Education in Vallejo since 1949

PLEASE PRINT

Child's Last Name _____ First Name _____ M.I. _____ M _____ F _____

Present Address _____ City _____ Zip _____

Place of Birth _____ Date of Birth (Mo-Day-Yr) _____ Telephone Number _____

E-mail Address _____ Daytime Number _____

Religion _____ School child is presently attending _____

CHILD BAPTIZED: ___ Y ___ N, DATE: _____ WHERE: _____ RECONCILIATION: ___ Y ___ N, DATE: _____ WHERE: _____

EUCCHARIST: ___ Y ___ N, DATE: _____ WHERE: _____ CONFIRMATION: ___ Y ___ N, DATE: _____ WHERE: _____

PLEASE PROVIDE COPIES OF ALL CERTIFICATES

Does your child have any learning needs of which we should be informed? If yes, please clarify:

FATHER:

Name: Last, First _____

Religion: _____

Occupation: _____

Employer: _____

MOTHER:

Name: Last, First _____ (Maiden)

Religion: _____

Occupation: _____

Employer: _____

Applicant lives with: ___ Both Parents ___ Mother ___ Father ___ Guardian

Do you have other child/children currently attending St. Basil's School and/or Pre-School? ___ Yes ___ No

If **Yes**, list child/children name(s): _____

Are you a registered, practicing member of St. Basil's Parish? _____ Parish # _____
(Weekly Envelopes)

Name of Parish if other than St. Basil's _____

Please complete reverse side also.

OFFICE USE ONLY

\$40.00 Cash/Check# _____ Birth Cert. Immunization Record

Last two years of Report Cards for incoming 2nd-8th graders (One year for incoming 1st graders)

If Applicable: Baptism Cert. Reconciliation Cert. Eucharist Cert. Confirmation Cert.

