

STUDENT ENROLLMENT APPLICATION
2018-2019 SCHOOL YEAR

Notre Dame School
1781 Marshall Rd., Vacaville, CA 95687
(707) 447-1460

Please Print Clearly

Application Fee: \$30.00 - Please submit with required documents listed at the bottom of this form with the completed application.

Student Name: _____ Entering Grade: _____ Birth Date: _____
(Last) (First) (Middle) in 2018

Birthplace: _____ Preschool/School Last Attended: _____ Current Grade: _____

School Location: _____ School Phone: _____ Does your child have an IEP? _____ Does your child have a 504 Plan? _____
(City, State)

Student's Religion: _____

Parish family is registered at _____

Baptized	First Communion
Church: _____	
City, State: _____	

Date Registered at above: _____ Attending Another Parish: _____
(Name) (Location)

Home Address: _____ Home Phone: _____
(Street) (City, State) (Zip)

Student Lives With: Both Parents: _____ Mother: _____ Father: _____ Other: _____
(Relationship)

Alternate Address if different from above: _____ Home Phone: _____
(Street) (City, State) (Zip)

Names and Ages of Siblings: _____

Father's Name: _____ Religion: _____

Occupation: _____ Employer: _____ Business Phone: _____

Cell Phone: _____ Email Address: _____

Mother's Name: _____ Religion: _____

Occupation: _____ Employer: _____ Business Phone: _____

Cell Phone: _____ Email Address: _____

Signature: _____

Copies of Required Documents:

Official Birth Cert. _____ Immunization Record _____ Baptismal Certificate _____ First Communion Certificate _____ Last Report Card _____ Standardized Test _____

Office Use Only: (Dates) Application Fee PAID: _____ Tested _____ Interviewed _____ Accepted _____ Registered _____ Cum Requested _____