

Kindergarten:
Application for Admission
School Year: 2020 - 2021



St. Catharine School
301 Second Avenue
Spring Lake, NJ 07762

Application Date: _____

STUDENT'S PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____

Home Address: _____ City: _____

Zip Code: _____ County: _____ Home Phone: _____

Primary email, where all communication may be sent: _____

Public School District: _____ Public School student would attend: _____

Child's Birth Date: ____/____/____ Gender: M ____ F ____

Birth City & State: _____ Country of Citizenship: _____

Language Spoken at Home: _____

Religion: _____ Registered Parish: _____

Address of Parish: _____
 (If other than St. Catharine – St. Margaret Parish)

Does student have siblings at SCS? Yes _____ No _____

Please list any other children in family

Sibling Name (Please include last name if different)	Date of Birth	Name of School Attending

Academic Background

Previous School Attended: _____

Address: _____

School Phone Number: _____ Grade: _____

Has your child ever been enrolled in any school in the Trenton Diocese? No ____ Yes ____

If yes, please give name & address of school: _____

Has your child ever had a Child Study Evaluation? No ___ Yes: ___

Sacramental History

	Parish	City, State	Date
Baptism			

PARENT/GUARDIAN INFORMATION

	Name	Address (If different)	Cell Number	Occupation	Religion
Mother (Include Maiden Name)					
Father					

All correspondence should be addressed as follows: _____

Home Situation: ___ Two Parents: Married ___ One Parent

(Check **all** that apply) ___ Parents Separated/Divorced ___ Restructured – Mother / Stepfather
 ___ Mother Remarried ___ Restructured – Father / Stepmother
 ___ Father Remarried
 ___ Guardian

Custody Issues ~To be completed if parents are separated or divorced:

Child resides with: _____

Which parent(s) has/have legal custody of student: _____

In cases of separation/divorce, the custodial parent must provide an official copy of the separation/divorce documentation.

Any additional information or comments: _____

Should you have any questions, please call Mrs. JoAnn Profita, School Office, 732-449-4424, ext. 300