St. Paul Catholic HIGH SCHOOL

APPLICATION FOR ADMISSIONS

APPLICATION PROCESS: An on-line application is also available at www.spchs.com

- 1.) Please complete all parts of this application and sign. Include APPLICATION, AUTHORIZATION FOR RELEASE OF STUDENT INFORMATION FORM and GUIDANCE INFORMATION FORM.
 - * Please include report cards or school transcripts from present school year and previous school year.
 - * Copy of SBAC or IOWA Results
 - * ENGLISH and MATHEMATICS RECOMMENDATION FORMS may be sent separately.
- 2.) Students applying to 9th or 10th grade must take the **High School Placement Exam**.
- 3.) A personal interview is required for all transfer students and may be required for some applicants prior to the Admission Committee review.
- 4.) Candidates for Grade 12 will be considered only for those who have moved into the area.*

A. APPLICANT INFORMATION	Please Print Candidate For Grade (Cir	rcle one) 9 10	0 11 *12		
Last Name	First	Middle			
Home Telephone Number	Student E-mail Address	Date of Birth	Gender		
Street	City/Town	State	Zip Code		
Religion	Church/Parish Where Registered	City/Town			
Current School	City/Town	7	Present Grade		
B. PARENT OR GUARDIAN (Ci	rcle one) Mother Father Guardian Grand	lmother Grandfather Ste	pmother Stepfather		
Last Name	First	(Circle title) Mr. M	Mrs. Ms. Miss Dr.		
Street	City/Town	State	Zip Code		
Home Telephone Number	Work Telephone Number	Cell Phone			
Employer	Occupation Preferred E-mail Address				
C. PARENT OR GUARDIAN (C	rcle one) Mother Father Guardian Grand	lmother Grandfather Sto	epmother Stepfather		
Last Name	First	(Circle title) Mr. M	Mrs. Ms. Miss Dr.		
Street	City/Town	State	Zip Code		
Home Telephone Number	Work Telephone Number Cell Phone				
Employer	Occupation	Occupation Preferred E-mail Address			
D. STUDENT LIVES WITH Par	ents Mother Father Guardian Grandn	nother Grandfather St	epmother Stepfather		

E. APPLICANT'S BROTHERS AND SISTERS

Name	Date of Birth	Gender	School Attendin	g Grade	
Name	Date of Birth	Gender	School Attendin	g Grade	
Name F. APPLICANT'S GRANDPARENT	Date of Birth	Gender	School Attendin	g Grade	
Paternal (Include first names of both gran	ndparents, if applicable	le.)			
Address	City/Town		State	Zip Code	
Maternal (Include first names of both gra	ndparents, if applicab	ble.)			
Address	City/Town		State	Zip Code	
G. HOW DID YOU FIRST LEARN A	BOUT ST. PAUL C.	ATHOLIC HIGH	SCHOOL? (Circle on	e)	
Alumni Billboard Catholic Transcr	pt CCD Visit	Church Bulletin	Class Visit Coach	Current Student	
Lawn Sign Mailing Newspaper Ad	d Open House	Parent Pastor	Poster Principal	Relative Attends(ed)	
Sibling Attends(ed) Social Media	Summer Camp T	eacher Website	Other		
H. LIST NAMES OF PARENTS OR S	IBLINGS WHO AT	TENDED OR GR	ADUATED FROM ST	. PAUL	
Name		Relatio	onship	Year of Graduation	
Name		Relatio	onship	Year of Graduation	
Name		Relatio	onship	Year of Graduation	
I. ACADEMIC, ATHLETIC AND EX involved.	TRA-CURRICULA	R ACTIVITIES P	lease list any activities i	n which you are currently	
SIGNATURE OF STUDENT			Date		
SIGNATURE OF PARENT/GUARDIAN			Date		