

# ST. PAUL CATHOLIC HIGH SCHOOL

## APPLICATION FOR ADMISSIONS

**APPLICATION PROCESS:** An on-line application is also available at [www.spchs.com/applynow](http://www.spchs.com/applynow)

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 NWEA MAP testing

\* **ENGLISH** and **MATHEMATICS RECOMMENDATION FORMS** should be mailed by teachers.

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 (Circle one) 9 10 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	Present Grade	

**B. PARENT OR GUARDIAN** (Circle one) Mother Father Guardian Grandmother Grandfather Stepmother Stepfather

Last Name	First	(Circle title) Mr. 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** (Circle one) Mother Father Guardian Grandmother Grandfather Stepmother Stepfather

Last Name	First	(Circle title) Mr. Mrs. Ms. Miss Dr.	
Street	City/Town	State	Zip Code
Home Telephone Number	Work Telephone Number	Cell Phone	
Employer	Occupation	Preferred E-mail Address	

**D. STUDENT LIVES WITH** Parents Mother Father Guardian Grandmother Grandfather Stepmother Stepfather

**E. APPLICANT'S BROTHERS AND SISTERS**

Name	Date of Birth	Gender	School Attending	Grade
Name	Date of Birth	Gender	School Attending	Grade
Name	Date of Birth	Gender	School Attending	Grade

**F. APPLICANT'S GRANDPARENTS**

Paternal (Include first names of both grandparents, if applicable.)			
Address	City/Town	State	Zip Code
Maternal (Include first names of both grandparents, if applicable.)			
Address	City/Town	State	Zip Code

**G. HOW DID YOU FIRST LEARN ABOUT ST. PAUL CATHOLIC HIGH SCHOOL? (Circle one)**

Alumni	Billboard	Catholic Transcript	CCD Visit	Church Bulletin	Class Visit	Coach	Current Student	
Lawn Sign	Mailing	Newspaper	Open House	Parent	Pastor	Poster	Principal	Relative Attends(ed)
Sibling Attends(ed)	Social Media	Summer Camp	Teacher	Website	Other			

**H. LIST NAMES OF PARENTS OR SIBLINGS WHO ATTENDED OR GRADUATED FROM ST. PAUL**

Name	Relationship	Year of Graduation
Name	Relationship	Year of Graduation
Name	Relationship	Year of Graduation

**I. ACADEMIC, ATHLETIC AND EXTRA-CURRICULAR ACTIVITIES** Please list any activities in which you are currently involved.


**SIGNATURE OF STUDENT****Date****SIGNATURE OF PARENT/GUARDIAN****Date**