

ARCHDIOCESE OF LOS ANGELES

Enrollment Application

St. Dominic Savio School



PLEASE PROVIDE ALL APPLICABLE DOCUMENTS WITH APPLICATION

Incomplete applications will **NOT** be processed until **ALL** documents are submitted

For office use only

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|--|---|
| <input type="checkbox"/> Signed Application
<input type="checkbox"/> Immunization Records (include grade 7 Tdap, if applicable)
<input type="checkbox"/> Birth Certificate
<input type="checkbox"/> Baptismal Certificate (if baptized) | <input type="checkbox"/> Communion Certificate (if applicable)
<input type="checkbox"/> Current Report Card (grades 1-8)
<input type="checkbox"/> Current Standardized Testing (grades 1 – 8) |
|--|---|

Today's Date:

ACADEMIC SCHOOL YEAR: _____

- | | | | | | |
|--|-----------------------|--|--|--|---|
| <input type="checkbox"/> New Family
<input type="checkbox"/> Returning Family | Student(s) live with: | <input type="checkbox"/> Both natural parents in the same house
<input type="checkbox"/> Both natural parents in different houses | <input type="checkbox"/> Father Only
<input type="checkbox"/> Mother Only | <input type="checkbox"/> Father/Stepmother
<input type="checkbox"/> Mother/Stepfather | <input type="checkbox"/> Grandparent(s)
<input type="checkbox"/> Legal Guardian(s) |
|--|-----------------------|--|--|--|---|

Student's Primary Residence (Address / City / Zip)

REQUIRED: Student Ethnic Origin: ☐ Multi-Racial ☐ African American ☐ Asian ☐ Filipino ☐ Hispanic ☐ Native American ☐ White / Caucasian

<input type="checkbox"/> Male <input type="checkbox"/> Female	Student Last Name	First	Middle
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Birthdate	Birthplace	Student's First Language	Language Spoken at Home
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Grade Entering	Current School	School Address	School Phone Number
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Baptism Date	Church	Church Address	Church Phone Number
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1 st Communion Date	Church	Church Address	Church Phone Number
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Legal Father's Last Name	First	Middle
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<input type="checkbox"/> Single <input type="checkbox"/> Divorced	<input type="checkbox"/> Married <input type="checkbox"/> Remarried	<input type="checkbox"/> Separated <input type="checkbox"/> Deceased	Religion	Mobile Phone
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Address / City / Zip (if different from above)	Email Address
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Birthplace (City / State / Country)	Birthdate	Occupation
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Legal Mother's Last Name	Mother's Maiden Name	First	Middle
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<input type="checkbox"/> Single <input type="checkbox"/> Divorced	<input type="checkbox"/> Married <input type="checkbox"/> Remarried	<input type="checkbox"/> Separated <input type="checkbox"/> Deceased	Religion	Mobile Phone
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Address / City / Zip (if different from above)	Email Address
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Birthplace (City / State / Country)	Birthdate	Occupation
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Briefly state why you would like your child to attend St. Dominic Savio School:

Non-Discrimination Policy

St. Dominic Savio School admits students of any race, color, national or ethnic origin to all rights, privileges, programs and activities generally accorded to and/or available to students at school.