STUDENT REGISTRATION FORM - ST. DIDACUS SCHOOL

TODAY'S DATE:		APPLICAL					ON FOR GRADE:		
STUDENT LAST NAME	MIDDLE NAME	STUDENT FIRST NAME SEX		DATE OF BIRTH		PLACE OI	BIRTH	For Office use: FAMILY #:	
Ethnic background (Optional): () Native American () Asian () Afro American () Hispanic/l							Latino		
			asian-White/Other () Filipino () Multi-						SIBLINGS:
	. ,	<u> </u>							
HOME ADDRESS		CITY			ZIP CODE		HOME PHONE		
		CA		CA					
FAMILY INFORMATION									
FATHER'S FIRST NAME	MIDDLE NAME	LAST NAME	BIRTHPLACE		RELIGION	OCCUPATION	MARITA	L STATUS / DECEASED	
MOTHER'S FIRST NAME	MAIDEN NAME	LAST NAME	BIRTHPLACE		RELIGION	OCCUPATION	MARITAL STATUS / DECEA		EASED
Mother's emai	il address	Father's email address			Student's email address (if available)				
				L					
FATHER'S EMPLOYER NAME, ADDRESS AND WORK PHONE							CELL PHONE		
MOTHER'S EMPLOYER NAME, ADDRESS AND WORK PHONE							CELL PHONE		
Emergeny Contact Address					Cell Phone email				
SCHOOL ATTENDED GRADE SCHOOL ADDRESS SCHOOL ADDRESS							CITY / CTAT	FF / 7ID	
NAME OF LAST SCHOOL ATTENDED		GRADE SCHOOL ADDRESS					CITY / STATE / ZIP		
		SACRAM	ENTAL INFORMATION						
BAPTISM DATE		CHURCH			CITY		STATE	VERIFIC	CATION
	·								
COMMUNION DATE	CHURCH			ГΥ	STATE	VERIFIC	CATION		
CONFIRMATION DATE	CHURCH	CHURCH			ТҮ	STATE	VERIFIC	CATION	
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