

2024-2025 New Student Application

Student's Name: _____
Last First Middle

Home Address: _____

City State Zip Code Home Phone

Date of Birth: _____ Place of Birth: _____

Social Security No.: _____ Birth Certificate No. _____

Student's Gender: Male / Female Child's Race (White/Asian/Black/Hispanic): _____

Father's Name: _____ **Date of Birth:** _____

Address (if different than students): _____

Employer: _____ Work Phone No.: _____

Email Address: _____ Cell Phone No. _____

Mother's Name: _____ **Date of Birth:** _____

Address (if different than students): _____

Employer: _____ Work Phone No.: _____

Email Address: _____ Cell Phone No. _____

Guardian's Name (if different than Mother/Father): _____

Address (if different than students): _____

Person to contact in case of an emergency other than parent: _____
Name Phone No.