ST. THOMAS AQUINAS
CATHOLIC SCHOOL

CURRENT GRADE: _____ **APPLYING TO GRADE:** _____

APPLICANT'S AGE ON SEPTEMBER 1, 2012: _____

PK3 and PK4 Applicants Please Specify:

O PK3: O 2 days/week O 3 days/week O 5 days/week
O PK4 Half Day (5 days/week; 8am-Noon)
O PK4 Full Day (5 days/week; 8am-3pm)

Applicant / Family Information

Legal Name _____
First Middle Last Preferred Name

Gender O Male O Female **Age** _____ **Date of Birth** _____/_____/_____
Month Date Year

Parents _____ _____
Mother's Name *Father's Name*

Home Address _____

Home Phone _____ **Home Email** _____

Mother's Work/Cell Phone _____

Father's Work/Cell Phone _____

Mother's Occupation _____

Father's Occupation _____

Are applicant's parents currently parishioners at St. Thomas Aquinas Church? O Yes O No Parish ID #: _____

If not parishioners at St. Thomas Aquinas, are applicant's parents Catholic?
O Yes, Father is Catholic. O Yes, Mother is Catholic. Parish: _____ O No

Does the applicant have sibling(s) who currently attend St. Thomas Aquinas? O Yes O No
Current STA Student Name(s)/Grades(s): _____

Is the applicant a baptized Catholic? O Yes O No

Please list schools attended by the applicant (beginning with the current school):

School _____ Grade(s) Attended _____

Address _____ Phone Number _____

School _____ Grade(s) Attended _____

Address _____ Phone Number _____

Has the applicant:
Repeated a grade? O Yes O No If Yes, which grade? _____

Been dismissed or suspended from school for any reason? O Yes O No

If yes, explain the situation including the name of the school and the Principal: _____

_____

_____

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Applicant's Full Name (*Last, First and Middle*)**:**

_____

Current Grade: _____ **Applying To Grade:** _____

Family Statement

1. Why do you feel St. Thomas Aquinas Catholic School would be a good fit for your child?

2. What are your child's greatest areas of need, and what steps have been taken to address these concerns?

3. Does your child receive any tutoring or academic enrichment outside the classroom? If so, please explain.

4. Has your child completed any diagnostic testing? If yes, please explain.

5. Have accommodations or modifications been recommended? If yes, please explain.

6. Please detail your family's involvement with St. Thomas Aquinas Parish and School, if any (ex.: organizations, memberships, committees, fundraising support, legacy information, etc.).

I understand that withholding or misrepresenting information requested in this questionnaire may jeopardize my child's admission decision. My signature below affirms that all of the information contained in this application is correct, complete and honestly presented.

Signature of Parent or Guardian X_____