

Queen of All Saints
Roman Catholic Elementary School

Please print

STUDENT INFORMATION:

Name: _____ **Grade:** _____ **Sex:** M / F **Birthdate:** ___/___/___
Last First M.I.

Is this child the oldest child, in your family, registered at Queen of All Saints School? YES / NO

Religion of Student: _____ **Name of church attended:** _____

FAMILY INFORMATION:

Address: _____ Home Phone (____) _____ - _____

City: _____ State: _____ Zip Code: _____

Student lives with: circle one: Mother Father Both Parents Guardian

Marital Status: circle one: Married Divorced Widowed Single

Father/Guardian:

Name: _____ Home Address: _____

Employer: _____ Occupation: _____

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Religious Affiliation: _____ Email Address: _____

Mother/Guardian:

Name: _____ Home Address: _____

Employer: _____ Occupation: _____

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Religious Affiliation: _____ Email Address: _____

EMERGENCY INFORMATION (Someone living at an address other than above)

Contact Person #1

Name: _____ Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Work Phone: (____) _____ - _____ Other: (____) _____ - _____

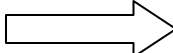
Contact Person #1

Name: _____ Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Work Phone: (____) _____ - _____ Other: (____) _____ - _____

Allergies: _____

Special Health Needs: _____
(Diabetic, wears glasses, suffers from headaches, must sit near front of classroom, and describe other)

OVER 

Dear Parents,

The Diocese of Gary is required by the Indiana Department of Education (511 IAC 6. 1-5-8) to document the first (native) language of each student and record this information on his/her permanent record.

Name of Student: _____

Grade: _____ Age: _____ Male or Female

1. English was the language learned when this student first began to talk. Yes / No
2. English is the language most often spoken at home. Yes / No
3. English is the language most often spoken by the parents of this student. Yes / No

If you answered "NO" to questions 1, 2, or 3, specify the language used other than English: _____

(Parent's Signature and Date)

Ethnic Background Information

Please mark the appropriate boxes that pertain to your child.

	Male	Female	Catholic	Non-Catholic
American Indian/Native Alaskan				
Asian				
Black				
Hispanic				
Native Hawaiian/Pacific Islander				
White				
Multi-Racial				

Name of public school your child would attend if he/she were not attending Queen of All Saints School. _____

Other information which will better help us to serve the needs of your child:

