

2014-2015 APPLICATION FOR ENROLLMENT

	GRADE 2	014-2015							
Please circle the Grade for which you wish to apply *Age child MUST BE by August 31, 2014:	•	eK K1 K2	2 1	2	3 4	5	6	7	8
	CAMPUS	CHOICE							
Please indicate your campus choice. Place #1 for fi	irst choice and #2	for second cho	ice nex	t to the	campu	ses bel	low:		
ColumbiaLower Mills		3.6			Neponset				
			. T		-				
	STUDENT INF	ORMATION	N						
Student Legal Name:									
Last Name	Iame First Name			Middle Name					
Date of Birth: Place									
Home Telephone:	Student Gender	: Male: Fe	emale:_	Et	thnicity	:			
Student Address:Street		C'				- C			
Present Grade: Present School:						State		Zip	
Religion: Date of Bapti									
Please indicate whom the student lives with: B	oth Parents	_ Birth Mothe	er	Birth	n Father		_ O	ther	
	FAMILY INFO	ORMATION							
Mother/Guardian 1:									
Legal Name:	Relationship to Student:								
Address:Street		City				Ctoto			
			Call D					_	
	Work Phone: Cell Phone:								
Email:Occupa	pation: Mother's Maiden Name:								
Father/Guardian 2:									
		D 14' 1' 4	. 64 1	4					
_	Relationship to Student:								
Address:Street		City				State		Zip	
W		,	Call P	L				1	

_Occupation: _____

ADDITIONAL STUDENT INFORMATION

Has your child ever been placed of *If yes, please provide a copy with y	on an Individual Education Plan (IE our application.	P) or had a CORE evaluation?	Yes No							
•	ed with any learning disabilities?									
Has your child ever been suspend *If yes, please explain:	led or expelled from school?									
Please indicate the name(s) and grade(s) of any siblings applying to and/or attending Pope John Paul II Catholic Academy:										
	SIGNAT	TURE								
	JIGI VIII	CONE								
By signing below, I certify that the	ne information above is accurate.									
Name of Parent/Guardian (please print):										
Signature of Parent/Guardian	rate									
How did you hear about the Acad	demy? Newspaper Ad Church	n Bulletin	s/family Billboard							
☐ PJP Parent (please provide name)										
	☐ Other (please specify):									
	CAMPUS INF	ORMATION								
Columbia Campus 790 Columbia Rd Dorchester, MA 02125 617-265-0019 x7101	Lower Mills Campus 2214 Dorchester Ave Dorchester, MA 02124 617-265-0019 x7177	Mattapan Campus 120 Babson St Mattapan, MA 02126 617-265-0019 x7202	Neponset Campus 239 Neponset Ave Dorchester, MA 02122 617-265-0019 x7127							
For Office Use Only:										
Birth Certificate Baptismal Cel	rtificate Immunization Records	Report Card IEP_	Voucher							