

Faith in Action

43-775 Deep Canyon Road Palm Desert, CA 92260 Phone: (760) 346-3513 FAX: (760) 773-0673

2017 – 2018 NEW STUDENT PRELIMINARY APPLICATION FOR ADMISSION

Please return completed form, along with a copy of your child's two most recent report cards and the most recent testing scores, to the School Office.

A fee of \$50.00 is due upon application.

Circle Grade Student will be Entering in September 2017

K 1 2 3 4 5 6 7 8

PLEASE PRINT: Please fill out a separate form for each child. Name						
			F			
Date of Birth				1 st grade students must be 6 years by 9/1/17		
A. FAMILY INFORMATION						
Father			Rel	igion		
Home Address			City	/Zip		
Home Phone	Cell Number		Work Number			
Occupation	E-Mail Address					
Mother			Re	eligion		
Home Address			Cit	y/Zip		
Home Phone	Cell Number		Work Number			
Occupation	E-Mail Address _					
Please check where appropriate:	Lives with both parents		_ Liv	es with Mother Lives with Father		
Language spoken in the home:						

B. STUDENT INFORMATIO	DN:						
Name of Present School	Grade in 2016-17:						
School Address							
City, State, Zip)						
Is this student currently receiving Special Resources? yes no							
Has this student ever received Special Resources? yes no							
Has this student ever received additional services (speech, counseling, etc.) yes no							
If yes, please specify:							
O DADIOU INFORMATION	_						
C. PARISH INFORMATION	0. 04-4						
Name of current Parish which yo							
Is your child currently enrolled in	CCD classes?: No Yes	_ If yes, na	me of Ch	urch:			
D. SACRAMENTAL INFOR	MATION: Religion of chil	d:					
	_						
Baptism Date	Name of Church		City 8	& State			
Date of First Reconciliation	Name of Church		_/City 8	& State			
	_/		/				
Date of First Communion	Name of Church		City	& State			
Special Notes							
1. Please provide a copy of the student's two most recent report cards and the most recent testing scores.							
2. Please provide information re your child to succeed in the class administration upon application.	egarding any academic or physic sroom, if applicable. Attach info	cal accommo rmation/call f	dations w or an app	hich may be needed for ointment with school			
3. Please provide a copy of your please provide a copy of their Fin		certificates	. If your c	hild is entering Grades 3-8,			
Please list additional children	applying for acceptance:			Grade in 17-18			
1		_ M	F				
2		_ M	F				
3		_ M	F				

Parent/Guardian signature: _____ Date: _____