



ST. PETER SCHOOL

NEW STUDENT - APPLICATION FOR ENROLLMENT

2023-2024

Student's Name _____ Soc. Sec. # _____
Last First Middle

Student's Address _____ Home Phone _____

Gender at Birth: M F Racial Heritage _____ Date of Birth _____
Month/Date/Year

Age _____ Grade Entering _____ Last Enrolled Grade _____

For PreK-2, 3, and 4 year olds: (check one) 5 days _____ or 3 days _____

School last attended _____
Address: _____ Phone: _____
(St. Peter School must be able to obtain all records from your child's previous school)

Father's Name _____
Last First Middle

Father's
Mailing Address _____
Street & Number P. O. Box City Zip Code

Father's Cell # _____ Father's Work # _____

Father's Email _____ Attended SPS? _____

Father's Employer _____

Mother's Name _____
Last First Middle Maiden

Mother's
Mailing Address
(if different) _____
Street & Number P. O. Box City Zip Code

Mother's Work # _____ Mother's Cell # _____

Mother's Email _____ Attended SPS? _____

Mother's Employer _____

Parent's Marital Status _____

If parents are not living together, who does the child reside with _____

If divorced, who has legal custody/custodial parent?

Father_____ Mother_____ Joint_____ Other_____

Name of legal Guardian, if any_____ Relationship to Child_____

(The school requires current legal documents regarding custody on file at all times)

Catholic? Yes or No Other Religion _____

If Catholic, list the Church Parish you are registered with_____

Church Parish in which you live _____

Church Parish where you attend _____

THE CHURCH WILL PROVIDE A LIST OF THOSE ELIGIBLE FOR PARISH SUPPORT.

Please include any information about your child, you feel would be helpful to us.

Note: This application cannot be processed without the following documents.

Please attach the following documents:

- transcript and standardized test results (if applicable)
- Current year report card (if applicable)
- birth certificate
- baptismal certificate (if applicable)
- first communion certificate (if applicable)
- social security card
- child custody documents (if applicable)
- immunizations record

Parent's Signature_____ Date_____

St. Peter School employs personnel and admits students of any race, color, nationality, or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students and personnel at the school. It does not discriminate on the basis of race, color, any national or ethnic origin in the administration of its educational policies, admissions policies, athletics, or any other school administered program.



ST. PETER SCHOOL FINANCIAL RECORD FORM

Family Name _____

Person responsible for tuition payments _____

Mailing address _____ Phone # _____

Students returning

Grade Entering

New students entering

Grade Entering

Church Parish in which you live _____

Church Parish you support _____

Payment plan: ** Full payment \$ _____ 12 payments \$ _____
 11 payments \$ _____ or 10 payments \$ _____

**** (5% discount if paid in full before June 1, 2023. The 5% discount also applies to new families registering after the June 1st deadline and paying in full at the time of registration.)**

For Office Use Only

CUSTODY PAPERS RECEIVED (Yes/No) circle one

Parish Affiliation Voucher _____

Immunization Records Complete _____ Incomplete _____

Registration fee _____ Date Paid _____ Non Parish Fee _____