

K-5 Application Form



Please check if you would like more information about:

☐ Child Care ☐ Education Savings Account (ESA) ☐ Free/Reduced Lunch

FOR OFFICE USE:

Date Rcvd. _____

STUDENT INFORMATION

Full Name (First/Middle/Last) Birth Date Preferred/Nick Name Grade (2024-2025) Baptism Date/Church

Address: _____

City, State: _____ Zip: _____

FAMILY INFORMATION

Last Name of Family: _____

Father: _____ Email: _____ Primary Phone: (____) _____

Secondary Phone: (____) _____

Address (Street, City, State, Zip) If different from student(s)

Employer: _____ Occupation: _____ Wk Phone: (____) _____

Are you an alumnus of: ☐ All Saints ☐ Regis ☐ LaSalle ☐ Xavier HS Grad. Year _____

Mother: _____ Email: _____ Primary Phone: (____) _____

Secondary Phone: (____) _____

Address (Street, City, State, Zip) If different from student(s)

Employer: _____ Occupation: _____ Wk Phone: (____) _____

Are you an alumnus of: ☐ All Saints ☐ Regis ☐ LaSalle ☐ Xavier HS Grad. Year _____

Marital Status of Parents: ☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Single

Legal Guardian (if different than above):

Name Email: _____ Home Phone: (____) _____

Cell Phone: (____) _____

Address (Street, City, State, Zip)

Please List Siblings (youngest to oldest)

Full Name Birth Date Current School (including preschool) Grade/Age

-over-

Registration Form Cont'd.

TRANSFERRING STUDENTS

Previous School(s) Attended _____

Grades Attended _____

Address of Previous School Attended _____

ADDITIONAL EDUCATION SERVICES-Please mark if your child has any of the following:

☐ Speech ☐ IEP ☐ 504 Plan ☐ ELL Services ☐ Title 1 Math ☐ Title 1 Reading ☐ Other

List here _____

PARISH INFORMATION

☐ All Saints ☐ I/we plan to join the parish ☐ I/we plan to complete RCIA at All Saints this year

☐ St. Wenceslaus ☐ Immaculate Conception

☐ Other Catholic Parish _____ ☐ Non-Catholic Church _____

If you or your child are not Catholic, are you interested in joining the Catholic Church? _____

Because of the generous support of All Saints Parish, tuition discounts are given to All Saints Catholic Parish members. If you wish to join All Saints Parish, please contact the church office at 363-6130.

ETHNICITY

The school is required to provide information for state and federal reports regarding the racial/ethnic composition of the student population. If you are willing, please check the racial or ethnic background of your child.

☐ American Indian ☐ Asian/Pacific Islander ☐ Black, not Hispanic

☐ Caucasian ☐ Hispanic ☐ Multi-racial ☐ Other _____

SCHOOL DISTRICT

☐ Cedar Rapids ☐ Marion ☐ Linn Mar

☐ Mount Vernon ☐ College Community ☐ Springville ☐ Other _____

List the public school your child would attend: _____

How did you hear about All Saints Parish School? _____

Signature of Parent(s) _____

Date _____