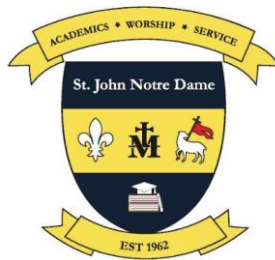


Date Rec'd \_\_\_\_\_

App. Fee \$ \_\_\_\_\_

Check # \_\_\_\_\_



\*\*\*\*\* Office Use \*\*\*\*\*

**St. John Notre Dame School**  
**309 Montrose Dr. Folsom, CA 95630**  
**(916) 985-4129**

**2021 - 22 APPLICATION FOR ADMISSION (GRADES 1 - 8)**

**PLEASE PRINT**

Application Fee: **\$40.00 Per Applicant** (Non-refundable)

Child's Full Name \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Child's Age \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip

Home Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Entering Grade (2021-22) \_\_\_\_\_ Baptized? ☐ Y ☐ N

**REQUIRED DOCUMENTATION (For Office Use Only)**

*Photocopies of all original certificates will be taken at the school office and immediately returned to you.*

**Last two years of academic test scores and report cards** (where applicable) \_\_\_\_\_, \_\_\_\_\_

**Immunization Record** \_\_\_\_\_ **Photo of Child** \_\_\_\_\_

**Original Birth Certificate** \_\_\_\_\_ **Verified by** \_\_\_\_\_ **Date** \_\_\_\_\_

**Original Baptismal Certificate** \_\_\_\_\_ **Verified by** \_\_\_\_\_ **Date** \_\_\_\_\_

1<sup>st</sup> Eucharist Date \_\_\_\_\_ Reconciliation Date \_\_\_\_\_ Confirmation Date \_\_\_\_\_

Current/Previous School(s) \_\_\_\_\_

Have you completed an assessment (academic, speech, psychological, etc.) for your child? ☐ Y ☐ N

Has your child been found eligible for services through a school district or other school (IEP/ISP)? ☐ Y ☐ N

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If Yes to any of the above, please attach any pertinent paperwork to application.**

Why are you interested in placing your child in a Catholic school?

Father's Faith \_\_\_\_\_

Mother's Faith \_\_\_\_\_

Parish name and envelope # where registered \_\_\_\_\_  
(*Must be supplied to be considered a parishioner*)

Date of Parish registration \_\_\_\_\_

Are you a SJND alumni? ☐Y ☐N If so, year of graduation \_\_\_\_\_

Home Status: ☐ Parents are Married ☐ Parents are Separated\*  
☐ Parents are Divorced\* ☐ Parent is Deceased

How long have you lived in this area? \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Wk. Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Wk. Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\*Additional Address: Parent Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address

City

Zip

Ethnicity: (For Catholic School Data Information)

☐ American Indian/Native  
☐ African American  
☐ Native Hawaiian/Pacific

☐ Asian  
☐ Hispanic  
☐ White

☐ Multi

How did you hear about SJND?

☐ Palladio Billboard  
☐ Style Magazine  
☐ Activities & Pre-School Expo

☐ R.E. Flyer  
☐ SJND Website  
☐ Friend/SJND Family

☐ Other \_\_\_\_\_

**All requested documents must accompany application before further processing.**