

Date of Application \_\_\_\_\_  
Parish of Membership \_\_\_\_\_  
Grade in **Fall 2019** \_\_\_\_\_  
Referred By \_\_\_\_\_

**APPLICATION FOR ADMISSION**

Are you a graduate of OLLS? \_\_\_\_ Father \_\_\_\_ Mother

Student Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Religion of Student \_\_\_\_\_ Siblings \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Child lives with \_\_\_\_\_ Previous Schools Attended \_\_\_\_\_

**PARENT INFORMATION**

Father's Name \_\_\_\_\_  
Birth Place \_\_\_\_\_  
Religion \_\_\_\_\_  
Employer \_\_\_\_\_  
Position \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Birth Place \_\_\_\_\_  
Religion \_\_\_\_\_  
Employer \_\_\_\_\_  
Position \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

**FORMS TO BE ATTACHED TO THIS APPLICATION**

- \_\_\_\_ Birth Certificate
- \_\_\_\_ Immunization record
- \_\_\_\_ NC Health Assessment (Kindergarten)
- \_\_\_\_ **TRANSFER STUDENTS need to submit a copy of their current report card & recommendation form**
- \_\_\_\_ Baptismal Certificate
- \_\_\_\_ First Communion Certificate (if applicable)
- \_\_\_\_ Court Order/Custody Arrangement (if applicable)

**SPECIAL INFORMATION** (Check all that apply)

*This information will allow an honest assessment of whether or not Our Lady of Lourdes School can meet the needs of your student.*

- Has an Individual Educational Plan
- Has had educational or psychological testing
- Has the following allergies \_\_\_\_\_
- Takes medication daily (list) \_\_\_\_\_
- Has the following medical condition(s)/physical limitation(s) \_\_\_\_\_
- Is this condition life-threatening or necessitate staff to give treatment? Please explain:  
\_\_\_\_\_
- Has received tutoring for \_\_\_\_\_
- Repeated grade \_\_\_\_\_

**APPLICATION FEE**

\_\_\_\_\_ A \$75.00 **non-refundable** application fee (per **CHILD**) must be enclosed with this application to be considered for admissions. Applications will be processed according to our admissions policy as room becomes available.

**Parent Signature** \_\_\_\_\_