



Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Single Parent \_\_\_\_\_ Remarried **(over)**  
\_\_\_\_\_ Father/Stepmother \_\_\_\_\_ Mother/Stepfather

Full Name of Step-Parent: \_\_\_\_\_

Is there a court-ordered custodial agreement? \_\_\_\_\_ Yes \_\_\_\_\_ No  
**(If yes, provide a copy of the custody order.)**

Previous School(s) attended: \_\_\_\_\_

Method of Transportation \_\_\_\_\_ Car \_\_\_\_\_ Walk

Does your child have special needs? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain:

\_\_\_\_\_

Language spoken at home if not English: \_\_\_\_\_

Other children in the **immediate** family attending St. Dorothy School:

Name

Grade

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Please choose your child's attendance from the following options:***

**\*\* If choosing 3 day PreK 3, Wednesday must be selected**

**PreK-3:** 3 4 5 Days **Please Circle:** Mon Tues **Wed** Thurs Fri  
Full Day: \_\_\_\_\_ (8:00-2:45) \_\_\_\_\_ Half Day: (8:00-11:30)

**PreK-4:** \_\_\_\_\_ 3 Days (Mon, Wed, Fri.) \_\_\_\_\_ 5 Days  
Full Day: \_\_\_\_\_ (8:00-2:45) \_\_\_\_\_ Half Day: (8:00-11:30)

Before and after school CARES will be available for Pre-K. \_\_\_\_\_ Yes, I am interested.  
(Please complete CARES registration, can also be found on website.)

I certify all of the information on this application is correct.

\_\_\_\_\_  
Parent/Guardian's Signature

Date: \_\_\_\_\_