



# St. Anne Roman Catholic Grade School

## 2010 Application for Admission

### Application Procedures for Admission

- \_\_\_ 1. Please complete the application. Please type or print in black ink.
- \_\_\_ 2. Please pay the required registration fee in a check or money order – made out to St. Anne Catholic Grade School. This fee is non-refundable and deducted from your tuition.
- \_\_\_ 3. Mail the application and payment to St. Anne Catholic Grade School, or please return to the school office.

### Admission Policy

As a Catholic School, St. Anne is committed to the principle of equal opportunity and learning for all regardless of race, creed, and national or ethnic origin. Admission is selective, and a student is expected to represent St. Anne Catholic Parish and School in a moral and positive way.

### Mailing Address

Admissions  
St. Anne Catholic Grade School  
5920 Arden Avenue  
Warren, Michigan 48092

**Please do not submit this application if your child/children previously attended a Catholic School and have not completed your tuition payment and balance.**

**Please contact our school for questions or more information**

586-264-2911  
[www.st-anne.net](http://www.st-anne.net)

**Thank you very much for your interest in St. Anne Catholic Grade School!  
We expect the best for our students.**

## Family Information

Family Name \_\_\_\_\_

The language(s) spoken at home \_\_\_\_\_

Permanent Address \_\_\_\_\_

NUMBER

STREET

APT#

CITY

STATE

ZIP CODE

Resident School District (for example, Warren Consolidated, Warren Woods, Centerline, Fraser, etc) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

AREA CODE

AREA CODE

E-mail Address \_\_\_\_\_

With whom does/do your child/children live with? \_\_\_\_\_

Does/do your child/children have a step parent(s) or a guardian(s)? \_\_\_\_\_

### Mother's Information

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

Last Name

Maiden Name

First Name

Is mother Catholic? (If yes, please specify which Rite you belong to, ex. Catholic, Roman, Eastern, Orthodox, Other) \_\_\_\_\_

Mother's Country and state of birth \_\_\_\_\_

If mother was naturalized, yes or no? If yes, the year of naturalization please \_\_\_\_\_

Mother's educational status \_\_\_\_\_

Mother's occupation \_\_\_\_\_

Marital status - Single, married, divorced, separated, or widow/widower \_\_\_\_\_

Mother's ethnic origin: \_\_\_Amer. Indian\_\_\_Middle East\_\_\_Asian\_\_\_African Amer.\_\_\_Hispanic\_\_\_Multiracial\_\_\_Caucasian\_\_\_Other

Mother's e-mail address and cell phone number \_\_\_\_\_

### Father's Information

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

Last Name

First Name

Is father Catholic? (If yes, please specify which Rite you belong to, ex. Catholic, Roman, Eastern, Orthodox, Other) \_\_\_\_\_

Father's country and state of birth \_\_\_\_\_

If father was naturalized, yes or no? If yes, the year of naturalization please \_\_\_\_\_

Father's educational status \_\_\_\_\_

Father's occupation \_\_\_\_\_

Marital status - Single, married, divorced, separated, or widow/widower \_\_\_\_\_

Father's ethnic origin: \_\_\_Amer. Indian\_\_\_Middle East\_\_\_Asian\_\_\_African Amer.\_\_\_Hispanic\_\_\_Multiracial\_\_\_Caucasian\_\_\_Other

Father's e-mail address and cell phone number \_\_\_\_\_

## Student(s) Information

1. Child's name \_\_\_\_\_  
Last Name First Name Middle Name

- Date of birth \_\_\_\_\_ City of birth \_\_\_\_\_
- Catholic or non-Catholic? \_\_\_\_\_
- Social Security number \_\_\_\_\_
- Child's grade in September \_\_\_\_\_
- Child's ethnic origin: \_\_\_ Amer. Indian \_\_\_ Middle East \_\_\_ Asian \_\_\_ African Amer. \_\_\_ Hispanic \_\_\_ Multiracial \_\_\_ Caucasian \_\_\_ Other
- Please indicate any medical conditions the school should be aware of: \_\_\_\_\_

2. Child's name \_\_\_\_\_  
Last Name First Name Middle Name

- Date of birth \_\_\_\_\_ City of birth \_\_\_\_\_
- Catholic or non-Catholic? \_\_\_\_\_
- Social Security number \_\_\_\_\_
- Child's grade in September \_\_\_\_\_
- Child's ethnic origin: \_\_\_ Amer. Indian \_\_\_ Middle East \_\_\_ Asian \_\_\_ African Amer. \_\_\_ Hispanic \_\_\_ Multiracial \_\_\_ Caucasian \_\_\_ Other
- Please indicate any medical conditions the school should be aware of: \_\_\_\_\_

3. Child's name \_\_\_\_\_  
Last Name First Name Middle Name

- Date of birth \_\_\_\_\_ City of birth \_\_\_\_\_
- Catholic or non-Catholic? \_\_\_\_\_
- Social Security number \_\_\_\_\_
- Child's grade in September \_\_\_\_\_
- Child's ethnic origin: \_\_\_ Amer. Indian \_\_\_ Middle East \_\_\_ Asian \_\_\_ African Amer. \_\_\_ Hispanic \_\_\_ Multiracial \_\_\_ Caucasian \_\_\_ Other
- Please indicate any medical conditions the school should be aware of: \_\_\_\_\_

4. Child's name \_\_\_\_\_  
Last Name First Name Middle Name

- Date of birth \_\_\_\_\_ City of birth \_\_\_\_\_
- Catholic or non-Catholic? \_\_\_\_\_
- Social Security number \_\_\_\_\_
- Child's grade in September \_\_\_\_\_
- Child's ethnic origin: \_\_\_ Amer. Indian \_\_\_ Middle East \_\_\_ Asian \_\_\_ African Amer. \_\_\_ Hispanic \_\_\_ Multiracial \_\_\_ Caucasian \_\_\_ Other
- Please indicate any medical conditions the school should be aware of: \_\_\_\_\_

