

APPLICATION TO ST. PIUS V CATHOLIC SCHOOL
CATHOLIC SCHOOLS – ARCHDIOCESE OF GALVESTON-HOUSTON

By means of this application, the Administration of St. Pius V welcomes your interest in our school.

TODAY'S DATE _____
NAME OF STUDENT _____ DATE OF BIRTH _____

ADDRESS _____ HOME PHONE _____
_____ ZIP CODE _____

PARENTS: _____ ETHNICITY _____
 MOTHER FATHER STEPMOTHER STEPFATHER

LEGAL GUARDIANS _____

WORK PHONE (MOTHER) _____ (FATHER) _____

CELL (MOTHER) _____ (FATHER) _____

EMAIL _____

I AM INTERESTED IN GRADE (S) _____

REASON FOR DESIRE TO TRANSFER _____

CURRENT GRADE PLACEMENT _____ CURRENT SCHOOL _____

PUBLIC SCHOOL DISTRICT IN WHICH YOU RESIDE _____

RELIGIOUS PREFERENCE _____

NAME OF CHURCH/PARISH IN WHICH FAMILY IS REGISTERED _____

DESCRIBE ANY TUTORING OR SPECIAL HELP THE CHILD IS RECEIVING OR HAS RECEIVED.

DESCRIBE ANY SPECIAL NEEDS OF THE CHILD OF WHICH THE SCHOOL SHOULD BE AWARE,
(EDUCATIONAL, HEALTH, ETC.)

DOES YOUR CHILD REGULARLY TAKE ANY TYPE OF MEDICATION? YES NO

IF YES, NAME OF MEDICATION: _____

IS YOUR CHILD IN A GIFTED AND TALENTED PROGRAM? YES NO

NUMBER OF CHILDREN IN THE FAMILY AND THE NAME OF THE SCHOOL EACH ATTENDS.

NAME _____
NAME _____
NAME _____
NAME _____

SCHOOL _____
SCHOOL _____
SCHOOL _____
SCHOOL _____

PLEASE RETURN THE COMPLETED FORM TO:

ST. PIUS V CATHOLIC SCHOOL
812 MAIN STREET
PASADENA, TEXAS 77506

INCLUDE IN YOUR PACKAGE A COPY OF THE FOLLOWING DOCUMENTS:

1. BIRTH CERTIFICATE
2. IMMUNIZATION RECORD
3. SOCIAL SECURITY CARD
4. BAPTISM (IF APPLICABLE)
5. SCHOOL RECORDS

IF YOU ARE NEW TO OUR SCHOOL, YOU WILL RECEIVE A PHONE CALL TO ARRANGE AN INTERVIEW WITH YOU AND YOUR CHILD. THANK YOU FOR YOUR INTEREST IN ST. PIUS V CATHOLIC SCHOOL.