



ST. LAWRENCE MARTYR SCHOOL
NEW STUDENT APPLICATION
YEAR 2018 - 2019

Date of Application _____
Grade Applying for _____
Screening Fee: \$60 1st-8th _____
\$70 TK &K _____

Previously Applied? Yes Year _____
No

PARISH INFORMATION

Are you registered in St. Lawrence
Martyr Parish? _____

SLM Church Envelope # _____

How long have you been registered,
active member? _____

Another Parish _____

APPLICANT INFORMATION

Legal Last Name _____ First _____ Middle _____

Address _____
Street City State Zip

Primary/Home Phone _____

Primary Email Address _____

Male Female Age _____ Date of Birth _____ Place of Birth _____
DK Students must be 4 by 9/1/2018 K Students must be 5 by 9/1/2018 1st Grade Students must be 6 by 9/1/2018

SACRAMENTAL INFORMATION To be filled in by office only

Date of Baptism _____ Verified _____

Church of Baptism _____ City/State _____

Date of First Communion _____ Verified _____

Church of First Communion _____ City/State _____



FAMILY INFORMATION

Father

Name: _____
 First Middle Last

Marital Status: Married Separated Divorced
 Single Parent Deceased

Place of Birth: _____
Religion: _____
Occupation: _____
Employed By: _____
Work Phone #: _____
Email Address: _____
Cell Phone: _____

Mother

 First Maiden Last

Married Separated Divorced
 Single Parent Deceased

Place of Birth: _____
Religion: _____
Occupation: _____
Employed By: _____
Work Phone #: _____
Email Address: _____
Cell Phone: _____

Please list all adults and children living at home with applicant:

Name	Age	Relationship

Name	Age	Relationship

Child's Present/Previous School

Name Address City/Zip

Has your child previously attended Kindergarten? Yes No

Please have your child's current/previous teacher fill out the recommendation form and mail to the school.

Are you aware of any learning, physical, or emotional difficulty with your child? Yes No

If "Yes", please explain:

Does your child currently have an Individual Educational Plan (IEP) or receive special services through your local public school (such as speech or occupational therapy)? If so, please explain.

Does your child presently take any regular medication?

Please list current parish/school activities you are involved in.

Why do you wish to enroll your child in St. Lawrence Martyr School?

Special Notes:

1. With this application, please have current/previous teacher complete and return the recommendation form.
2. For Grades 2-8 please provide a copy of the child's two most recent report cards and the most recent testing scores.
3. Please provide a copy of your child's birth and baptismal certificates. If your child is entering Grades 3-8, please provide a copy of their First Holy Communion Certificate.