

*Our Lady of Grace School*  
*New Student Application Form*  
*2010 – 2011 Academic Year*

Grade Entering \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

Family Name of Student (Please print) \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Sex \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

Child's Birthplace (City, State, Country) \_\_\_\_\_

Have you applied to Our Lady of Grace School in the past? \_\_\_\_\_ If yes, in what year? \_\_\_\_\_

**Father's Information:**

Family Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Birthplace (City, State, Country) \_\_\_\_\_

Employer \_\_\_\_\_

Employer Complete Address, City, State, Zip Code \_\_\_\_\_

Occupation / Title \_\_\_\_\_ Work Phone # \_\_\_\_\_

Religion \_\_\_\_\_ Ethnic Background \_\_\_\_\_

**Marital Status:**

Married \_\_\_\_\_ Divorced \_\_\_\_\_

Single \_\_\_\_\_ Widow \_\_\_\_\_

**Guardian's Information, if applicable:**

Family Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Employer \_\_\_\_\_

Employer Complete Address, City, State, Zip Code \_\_\_\_\_

Occupation / Title \_\_\_\_\_ Work Phone # \_\_\_\_\_

Complete Home Address, City, State, Zip Code \_\_\_\_\_

Religion \_\_\_\_\_ Ethnic Background \_\_\_\_\_

**Mother's Information:**

Maiden Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Birthplace (City, State, Country) \_\_\_\_\_

Employer \_\_\_\_\_

Employer Complete Address, City, State, Zip Code \_\_\_\_\_

Occupation / Title \_\_\_\_\_ Work Phone # \_\_\_\_\_

Religion \_\_\_\_\_ Ethnic Background \_\_\_\_\_

**Marital Status:**

Married \_\_\_\_\_ Divorced \_\_\_\_\_

Single \_\_\_\_\_ Widow \_\_\_\_\_

Will you be enrolling your child/ren in our extended Day Care program?  
(Day Care available in morning from 7:00 to 7:50 a.m. and in afternoon from dismissal to 6:00 p.m.)

Yes, we will be using Day Care \_\_\_\_\_

No, we will not be using Day Care \_\_\_\_\_

**(OVER)**

Please list below the complete information requested for the schools your child has attended, including the current school:

Name of current school Complete school address, city, state, zip Phone Number Grade

Reason for withdrawal from current school Date of withdrawal

Name of previous school Address, city, state, zip Phone Number Grade

**Financial Information:**

**PRINT name of parent** who is financially responsible for tuition, school fees, day care fees, and fundraising obligations

**SIGNATURE of parent** who is financially responsible for tuition, school fees, day care fees, and fundraising obligations

Date of Signature

**Parish Information:**

Are you registered members of Our Lady of Grace Parish? \_\_\_\_\_ If yes, OLG envelope # \_\_\_\_\_

Have your children regularly attended Religious Education classes? \_\_\_\_\_

In what parish programs are you involved? Please include length of involvement in program/s:

- You will be notified of a test date after your complete application packet has been returned.
- A short interview with the principal will take place while your child is being tested by a teacher.

You may return all completed forms to the school office Monday through Thursday between 8:00 a.m. and 4:00 p.m.; on Friday, between 8:00 a.m. and 1:00 p.m.; or you may mail the packet directly to:

**Our Lady of Grace School, 17720 Ventura Blvd., Encino, CA 91316**

This application is valid for one year from the date of submission. Renewal after one year is required to keep applicants on a current waiting list. There is no additional fee for this updating.

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**Office only:**

Verified by: \_\_\_\_\_

Fee Payment: \_\_\_\_\_

Notes: \_\_\_\_\_