



ST. THOMAS AQUINAS
APPLICATION FOR SCHOOL REGISTRATION



STUDENT DATA

Name _____
 (Last) (First) (Middle)
 Address _____
 City _____ Zip _____
 Cell. Phone _____ E-mail _____
 Lives with: ___ Parents ___ Mother ___ Father ___ Legal Guardian
 Birthdate _____ Male _____ Female _____
 Birth Place _____
 Preferred Name _____
 Social Security # _____ Religion _____
 Church/Parish _____
 Proposed Entry Grade _____
 Proposed Entry Date _____
 Public School Attendance Area _____

PARENTS/GUARDIAN DATA

Father _____
 (Title) (Last) (First)
 Graduate of STA? _____ Year _____ Religion _____
 Marital Status _____
 Mother _____
 (Title) (Last) (First) (Maiden Name)
 Graduate of STA? _____ Year _____ Religion _____
 Marital Status _____
 Address of each, if different than student address.
 Father _____
 Cell. Phone _____ **E-mail** _____
 Mother _____
 Cell. Phone _____ **E-mail** _____

OCCUPATION:

Father _____
 Address _____
 Phone _____
 Mother _____
 Address _____
 Phone _____

SCHOOL LAST ATTENDED

School _____
 Address _____
 City _____
 State _____ Zip _____
 Grade at time of withdrawal _____ (If applicable)
 Reason for transfer (If applicable) _____

DOES THIS STUDENT HAVE ANY SPECIAL EDUCATIONAL OR PHYSICAL NEEDS? YES _____ NO _____
 (If "Yes" attach a complete description.)

ALL SCHOOLS ATTENDED BY THIS STUDENT MUST BE LISTED ON THE REVERSE SIDE.

OPTIONAL: (check one) ___ African American ___ American Indian
 ___ Asian ___ Hispanic ___ Multiracial ___ White

Date of Application _____

LIST ALL SCHOOLS PREVIOUSLY ATTENDED BY THIS STUDENT AND THE REASON FOR WITHDRAWAL.

SCHOOL	ADDRESS	DATE OF WITHDRAWAL	REASON FOR WITHDRAWAL

All Application Materials Received:

- _____ Medical Immunization Record
- _____ Records from all previous schools
- _____ Custody Documentation**
- _____ Immigration & Naturalization Service Information**
- _____ Parishioner Certification*
- _____ Registration Fee*
- _____ Special Educational or Physical Needs Description

* If Locally Required

** If Applicable

By submitting this application I certify that all the above information is true and complete. I recognize and will meet my financial obligations to the school, tuition and fees that are charged for the education of my child.

Parent Signature _____

Date _____

FOR ADMINISTRATIVE USE ONLY

To be signed by the principal when all application materials are received.

Entry Date _____

Principal's Signature _____

Date _____



Please return application to: 2121 Reno Dr. NE Louisville, OH 44641

OFFICIAL APPLICATION FORM



ST. THOMAS AQUINAS HIGH SCHOOL AND MIDDLE SCHOOL

Confidential Recommendation for Admission

Recommendation: To be completed by a teacher, guidance counselor, or school administrator.

Name of Applicant: _____ How long have you known the applicant? _____

The student above is seeking admission to St. Thomas Aquinas High School or Middle School. We would appreciate your candid response regarding the student's intellectual promise and capacity for success. Your comments will be held in strict confidence and will not be shared with the student or parents. This recommendation will not become part of the student's permanent file. Thank you for your time and effort in completing this form.

	Excellent	Good	Average	Poor
Willingness to Serve Others				
Academic Achievement				
Academic Potential				
Consistency of Performance				
Quality of Daily Preparation				
Work Ethic				
Class Participation/Attentiveness				
Self-Direction				
Leadership Ability				
Relationship with Peers				
Relationship with Adults				
Respect for Others				
Integrity and Honesty				
Social and Emotional Maturity				
Exercises Self-Control				
Family Support for Education				

What strengths characterize this student? _____

What weaknesses, if any, do you see in this student? _____

Does this student accept responsibility? Yes _____ No _____ Comments: _____

Additional Comments (Optional): _____

School Official's Name: _____ Title _____

Signature: _____ Date: _____

PLEASE COMPLETE AND SUBMIT IN A SEALED ENVELOPE WITH YOUR SIGNATURE ACROSS THE SEAL.
 Parent should collect and return with their student's completed application OR this letter can be mailed directly to St. Thomas Aquinas.

St. Thomas Aquinas
 Attention: Ryan Hill
 2121 Reno Drive
 Louisville, OH 44641