

**SAINT CHARLES BORROMEIO SCHOOL**

10850 Moorpark Street  
North Hollywood, CA 91602  
(818) 508-5359 FAX (818) 508-4511

***APPLICATION FOR ENROLLMENT***

(Application Fee is Non-Refundable)

**(Please Print)**

\_\_\_\_\_  
Date (m/d/y)

\_\_\_\_\_  
Child's Last Name      First Name      Middle Name      Entering Grade

\_\_\_\_\_  
Street Address      City, State      Zip Code      Home Phone #

\_\_\_\_\_  
Birthdate (m/d/y)      Place of Birth      Sex      Religion      Ethnic Origin

\_\_\_\_\_  
School Now Attending      Street Address      City, State      Zip Code

\_\_\_\_\_  
Parish Name      Date of Registration (m/y)      Envelope # (if a Saint Charles parishioner)

\_\_\_\_\_  
Student Lives With      Home Conditions (Please circle one of the above)  
*Normal    Parent Deceased    Separated    Divorced    Re-Married    Other*

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**Parent/Guardian Information**

*Father/Stepfather/Guardian (Circle One)*

*Mother/Stepmother/Guardian (Circle One)*

Name \_\_\_\_\_ Name \_\_\_\_\_  
Relation \_\_\_\_\_ Relation \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City, State \_\_\_\_\_ City, State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_  
Personal Cel # \_\_\_\_\_ Personal Cel # \_\_\_\_\_  
Occupation \_\_\_\_\_ Occupation \_\_\_\_\_  
Company Name \_\_\_\_\_ Company Name \_\_\_\_\_  
Business Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_  
Religion \_\_\_\_\_ Religion \_\_\_\_\_  
Marital Status \_\_\_\_\_ Marital Status \_\_\_\_\_  
Birthplace \_\_\_\_\_ Birthplace \_\_\_\_\_  
Drivers License # \_\_\_\_\_ Drivers License # \_\_\_\_\_  
Maiden Name \_\_\_\_\_

If divorced/separated/single, physical custody of the child is with \_\_\_\_\_  
(COPIES OF LEGAL DOCUMENTS REQUIRED)

Is your child a baptized Catholic? Yes\_\_\_\_ No\_\_\_\_

If no, what religion is your child? \_\_\_\_\_

Baptism Information

First Communion Information

Parish_____	Parish_____
Address_____	Address_____
City_____	City_____
State/Country_____	State/Country_____
Date_____	Date_____

List Brothers and Sisters:

Name\_\_\_\_\_ Age\_\_\_\_ School Currently Attending\_\_\_\_\_

Name\_\_\_\_\_ Age\_\_\_\_ School Currently Attending\_\_\_\_\_

Name\_\_\_\_\_ Age\_\_\_\_ School Currently Attending\_\_\_\_\_

Name\_\_\_\_\_ Age\_\_\_\_ School Currently Attending\_\_\_\_\_

\_\_\_\_\_  
Parent Signature Date

\_\_\_\_\_  
Parent Signature Date

.....  
**FOR OFFICE USE ONLY:**

01/01/05

Date_____	Reg. Fee_____	General Fee_____	Acceptance_____
Check #_____	Cash_____	Verified By_____	Other_____

INITIAL IF ATTACHED:

Birth Certificate_____	Interview_____
Baptismal Certificate_____	Last Report Card / Assessment for Kinder_____
Communion Certificate_____	Letter of Referral (non-parishioner)_____
Immunizations_____	Entrance Test/Assessment_____
Test Scores_____	Expectation & Agreement Form_____
Other_____	

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**FOR PARISH CENTER USE ONLY:**

Registered at Saint Charles \_\_\_\_\_yes\_\_\_\_no

Date of Registration\_\_\_\_\_

Envelope #\_\_\_\_\_

Mass Attendance\_\_\_\_\_

Use of Collection Envelopes\_\_\_\_\_

Parish Service\_\_\_\_\_

Other\_\_\_\_\_

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