



# JOLIET DIOCESAN SCHOOL SYSTEM

## Student Information Sheet

SCHOOL \_\_\_\_\_ CITY \_\_\_\_\_ COUNTY \_\_\_\_\_

**1. STUDENT INFORMATION:**

NAME \_\_\_\_\_ SEX: M \_ F \_  
LEGAL LAST NAME FIRST MIDDLE

ENTRANCE DATE \_\_\_\_\_ GRADE \_\_\_\_\_ RELIGION \_\_\_\_\_  
MONTH/DAY/YEAR

FROM \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_  
NAME OF SCHOOL

BIRTHDATE \_\_\_\_\_ BIRTHPLACE \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_  
MONTH/DAY/YEAR CITY STATE

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

WHAT PUBLIC SCHOOL WOULD YOU ATTEND? \_\_\_\_\_ DISTRICT # \_\_\_\_\_

HOW MANY MILES DO YOU LIVE FROM THE CATHOLIC SCHOOL?

**HOME SITUATION:** (CIRCLE THE NUMBER OF THE SITUATION THAT APPLIES)

- |  |   |
|--|---|
| 1. LIVING WITH BOTH PARENTS.   | 7. PARENTS DIVORCED; LIVING WITH MOTHER ALONE, OR MOTHER AND STEPFATHER. (CIRCLE ONE) |
| 2. LIVING WITH SINGLE MOTHER/FATHER. (CIRCLE ONE)                                      | 8. PARENTS DIVORCED; LIVING WITH FATHER ALONE, OR FATHER AND STEPMOTHER. (CIRCLE ONE) |
| 3. FATHER NOT LIVING; LIVING WITH MOTHER ALONE, OR MOTHER AND STEPFATHER. (CIRCLE ONE) | 9. LIVING WITH GUARDIANS WHO ARE RELATIVES.   |
| 4. MOTHER NOT LIVING; LIVING WITH FATHER ALONE, OR FATHER AND STEPMOTHER. (CIRCLE ONE) | 10. OTHER _____   |
| 5. PARENTS SEPERATED; LIVING WITH MOTHER.  |   |
| 6. PARENTS SEPERATED; LIVING WITH FATHER.  |   |

IF #5 THROUGH #10 IS CIRCLED: WHO HAS CUSTODIAL RIGHTS?

**2. FATHER, STEPFATHER, GUARDIAN (CIRCLE ONE) INFORMATION:**

NAME \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_  
LEGAL LAST NAME FIRST MIDDLE

RELIGION \_\_\_\_\_ PARISH \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
(IF DIFFERENT FROM STUDENT'S ADDRESS)

PLACE OF BIRTH \_\_\_\_\_ EDUCATION: 8 9 10 11 12 13 14 15 BA MA PHD  
CITY STATE (CIRCLE HIGHEST GRADE COMPLETED)

HOME PHONE ( ) \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_ POSITION \_\_\_\_\_

**3. MOTHER, STEPMOTHER, GUARDIAN (CIRCLE ONE) INFORMATION:**

NAME \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_  
LEGAL LAST NAME FIRST MIDDLE

RELIGION \_\_\_\_\_ PARISH \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
(IF DIFFERENT FROM STUDENT'S ADDRESS)

PLACE OF BIRTH \_\_\_\_\_ EDUCATION: 8 9 10 11 12 13 14 15 BA MA PHD  
CITY STATE (CIRCLE HIGHEST GRADE COMPLETED)

HOME PHONE ( ) \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_ POSITION \_\_\_\_\_

NAME OF CHILD \_\_\_\_\_

SACRAMENTS

BAPTISM:

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

RECONCILIATION:

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

HOLY EUCHARIST:

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

CONFIRMATION:

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

OTHER SCHOOL(S) ATTENDED

CITY & STATE

GRADES

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Signature of Person Completing Form

\_\_\_\_\_  
Date

.....  
OFFICE USE ONLY

Withdrew: \_\_\_\_\_

Transferred to: \_\_\_\_\_  
Name of School City State

Graduation: \_\_\_\_\_