

Applicant Check List

- ___ Application Fee
- ___ Birth Certificate
- ___ Baptismal Certificate
- ___ Current Report Card
- ___ Letter of Intent from parent
- ___ Letter of Intent from student (3rd to 8th grade)
- ___ 2 Letters of Recommendation (teachers, pastor, extracurricular instructor) 1st to 8th grade only



For Office Use Only

- Year _____
- Grade _____
- Paperwork complete ___
_____ # _____
- Accepted _____
- Cornerstone _____
- FACTS _____

New Student Application

A non-refundable fee of \$100.00 is required at time of application

Student's Name _____
(First) (Middle) (Last)

Date of Birth: _____ Age: _____ Gender: ___ Male ___ Female

Place of Birth: _____ Citizen Status: _____

Religion: _____ Parish: _____

Home Internet Access: ___ Yes ___ No

Primary Address: _____
(Street)

(City) (State) (Zip Code)

Primary Phone Number: _____ Primary Cell Number: _____

Previous School: _____

Baptism: _____
(Date) (Church) (City/State)

Penance: _____
(Date) (Church) (City/State)

First Communion: _____
(Date) (Church) (City/State)

Confirmation: _____
(Date) (Church) (City/State)

PLEASE COMPLETE BOTH SIDES

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- ___ Application & Fee ___ Immunization Records ___ Documentation of Physical Exam ___ Bus Form
- ___ Registered for FACTS ___ Requested Documentation _____ Date Received

Student's Name: _____
(First) (Middle) (Last)

Siblings (Names & Ages): _____

Father's Name: _____
(First) (Middle) (Last)

Father's Address (if different from student's):

(Street)

(City) (State) (Zip Code)

Work Phone Number: _____

Cell Phone Number: _____

Email: _____

Employer: _____

Title: _____

C.K.R.S. Alumni: ____ Yes ____ No ____ Year graduated

Mother's Name: _____
(First) (Middle) (Last)

Mother's Address (if different from student's):

(Street)

(City) (State) (Zip Code)

Work Phone Number: _____

Cell Phone Number: _____

Email: _____

Employer: _____

Title: _____

C.K.R.S. Alumni: ____ Yes ____ No ____ Year graduated

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