



<input type="checkbox"/>	SIBLING
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# St. Edward-Epiphany Catholic School

10701 W. Huguenot Road, Richmond, VA 23235  
804/272-2881 www.seeschool.com

Office Use Only	
Date Received	__/__/__ <input type="checkbox"/>
Birth Certificate	<input type="checkbox"/>
Baptismal Certificate	<input type="checkbox"/>
Parishioner ID #	<input type="checkbox"/>
Records Release Form	<input type="checkbox"/>
School Health Records	<input type="checkbox"/>
Application Fee Ck#	_____ <input type="checkbox"/>

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Grade Applying For

## Application for Admission

**NOTE: PLEASE PRINT**

### Applicant Information

_____ Last Name	_____ First Name	_____ Full Middle Name	_____ Preferred Name
_____ Gender (M/F)	_____ Date of Birth	_____ City & State of Birth	_____ Religion
_____ Street Address		_____ Home Phone Number	
_____ City, State	_____ Zip Code	_____ Language(s) Spoken at Home other than English	

### Family Information

	Father	Mother
	Circle One: Dr. Mr.	Circle One: Dr. Mrs. Ms. Miss
Full Name		
Address (if different from above)		
Home Phone		
Cell Phone		
Email Address		
Occupation		
Employer		
Work Phone		
Religion		
Parish		
Envelope #/Parish ID #		
Graduate of SEES	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, year __/__/__	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, year __/__/__

**Please check all that apply:**  Single  Married  Separated  Divorced  
 Father Remarried  Mother Remarried  Father Deceased  Mother Deceased

**Who is responsible for finances?** \_\_\_\_\_ **Who has legal custody?** \_\_\_\_\_

\*Note: In the event of a divorce, decree of custody must be filed in the school office, as well as any specific instructions regarding release of the child to a parent. *All mailings and bills will be sent to the parent(s) listed above (or noted in the decree of custody) unless written notification to indicate otherwise.*

**Student lives with:**  Both Parents  Mother  Father  Guardian

Name of individual, other than parents, to contact in case of **emergency (this should be a local contact)**.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Applicant History

Sacramental Record	Date	Church	Location (City, State, Zip)
Baptism			
First Eucharist			
Confirmation			

Name of Current & Previous School(s) (Beginning with the most recent)	Dates	Grade(s)	Location

Has this student ever been tested or evaluation for the following: Learning Disability, ADD/ADHD, Speech/Language Therapy, Hearing Difficulty, Visual Difficulty, Diabetes, Heart Problems, Seizures, or any other special concerns?

No  Yes (if yes, please explain; Documentation from any testing MUST be on file in the school office):

\_\_\_\_\_  
\_\_\_\_\_

Official student records, including confidential testing results, from the previous school must be on file in this office prior to issuing an enrollment contract. In some cases students may be offered a provisional acceptance. This will be determined on a case by case basis. **Please note: If any information has been withheld at the time of application, the school reserves the right to reverse acceptance.**

Give a brief explanation why you are interested in having your child attend St. Edward-Epiphaney Catholic School:

\_\_\_\_\_

Other schools to which an application has been made:

\_\_\_\_\_

For 1<sup>st</sup>-8<sup>th</sup> grade applicants, why are you considering changing schools?

\_\_\_\_\_

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**A non-refundable \$50 application fee, per child, payable to SEES must accompany this form as well as birth certificate and baptismal certificate (if applicable).**

Printed Name of Parent/Guardian: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_



## St. Edward-Epiphany Catholic School Applicant Data

The following information is only used in general data surveys.

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please identify the ethnic status of your child:

- American Indian
- Asian/Pacific Islander
- Black
- Hispanic
- Multi-Racial
- White
- Other \_\_\_\_\_

All information will be kept confidential.

How did you ORIGINALLY hear about St. Edward-Epiphany Catholic School? Check all that apply:

- Family attends/attended
- St. Edward, Epiphany, St. Gabriel, St. Augustine, St. John Neumann or Sacred Heart Perry St. Parishioner
- Internet search engine
- SEES website
- Richmond Catholic Schools Diocese website, billboard or mailing
- Referred by: \_\_\_\_\_
- Other: \_\_\_\_\_

*St. Edward-Epiphany Catholic School does not discriminate on the basis of race, color, disability, national origin, or citizenship.*