

**Application for Admission**  
**St. Francis of Assisi Catholic School**

700 W. 18<sup>th</sup> Street, Yuma, AZ 85364  
Tel: 928-782-1539 Fax: 928-782-0403

Date: \_\_\_\_\_ School Year: \_\_\_\_\_ Entering Grade: \_\_\_\_\_

**STUDENT INFORMATION**

Legal Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Primary Language at Home: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_ Parish Registration: \_\_\_\_\_  
Student lives with Both Parents: \_\_\_\_\_ Mother: \_\_\_\_\_ Father: \_\_\_\_\_ Stepmother: \_\_\_\_\_  
Stepfather: \_\_\_\_\_ Other: \_\_\_\_\_  
Previous School Attending: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**SACRAMENTS**

Baptism Date: \_\_\_\_\_ Church: \_\_\_\_\_ City /State: \_\_\_\_\_  
Reconciliation Date: \_\_\_\_\_ Church: \_\_\_\_\_ City /State: \_\_\_\_\_  
First Eucharist: Date: \_\_\_\_\_ Church: \_\_\_\_\_ City /State: \_\_\_\_\_

*If you child has not received their sacraments would you like for them to be prepared to receive them Y/N*

**Student's Ethnicity/Race Data – Both Questions must be answered (for statistics only)**

*Is this individual Hispanic /Latino? \_\_\_\_\_ No, not Hispanic/Latino \_\_\_\_\_ Yes, Hispanic/Latino*  
*What is the individual's race? \_\_\_\_\_ American Indian or Alaskan Native \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American*  
*\_\_\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_\_\_ White*

**FAMILY INFORMATION – FATHER**

Legal Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_  
Home address (if different than student): \_\_\_\_\_ City/Zip: \_\_\_\_\_  
Place of Work: \_\_\_\_\_ Occupation: \_\_\_\_\_ Work Phone #: \_\_\_\_\_  
Cell Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_  
Religion: \_\_\_\_\_ Parish Registration: \_\_\_\_\_  
Parents' Marital Status: Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_  
Remarried: \_\_\_\_\_ *(a copy of custody/guardianship papers required if applicable)*

**FAMILY INFORMATION - MOTHER**

Legal Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Maiden: \_\_\_\_\_  
Home address (if different than student): \_\_\_\_\_ City/Zip: \_\_\_\_\_  
Place of Work: \_\_\_\_\_ Occupation: \_\_\_\_\_ Work Phone #: \_\_\_\_\_  
Cell Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_  
Religion: \_\_\_\_\_ Parish Registration: \_\_\_\_\_  
Parents' Marital Status: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_ Remarried: \_\_\_\_\_  
*(a copy of custody/guardianship papers required if applicable)*