

OLD MISSION SCHOOL
761 Broad Street
San Luis Obispo, CA 93401
(805)543-6019 Fax (805)543-6246

Application Date _____

NEW STUDENT APPLICATION

Application for (circle one):

For which school year? _____

PS Level I (age 3) PS Level II (age 4) TK K 1 2 3 4 5 6 7 8

Student Information

Name: _____ Gender: _____
Last First Middle M/F

Birthdate: _____ Birthplace: _____
Month/ Day /Year City/State

Religion: _____ Baptized Catholic _____ Other faith (please list): _____

Current School: _____

Complete School Address: _____
Street City State Zip Code

Child lives with (check): _____ Both Parents _____ Mother _____ Father _____ Mother (part-time)
_____ Father (part-time) _____ Guardian _____ Other: Explain _____

Child has a sibling presently attending Old Mission School **(check one):** _____ Yes _____ No

Parent/Guardian Information

(circle one) Father / Step-Father / Guardian

_____ **(check)** ___ Mr. ___ Dr.
Last First Middle

Address: _____
Street City State Zip Code

Home Phone _____ Cell Phone _____ Work Phone _____

Employer: _____ Occupation: _____

Birthdate: _____ Birthplace: _____
Month/ Day /Year City/State

Religion: _____ Baptized Catholic _____ Other faith (please list): _____

Email address: _____

(circle one) Mother / Step-Mother / Guardian

_____ **(check)** ___ Mrs. ___ Ms. ___ Dr.
Last First Middle

Address: _____
Street City State Zip Code

Home Phone _____ Cell Phone _____ Work Phone _____

Employer: _____ Occupation: _____

Birthdate: _____ Birthplace: _____
Month/ Day /Year City/State

Religion: _____ Baptized Catholic _____ Other faith (please list): _____

Email address: _____

Registered In: _____ Old Mission Parish _____ St. Elizabeth Ann Seton Parish
_____ Nativity Parish _____ St. Timothy Parish
Year registered in parish checked above: _____
_____ Other Parish (please list): _____
_____ No Parish Affiliation

Registration Information (Please initial each statement):

_____ I/We understand that my/our child will not be placed in the eligibility pool unless the required fees, certificates, and academic records accompany this form.

_____ I/We understand that the \$65.00 application fee is non-refundable.

_____ I/We agree to abide by all policies and procedures outlined in the Old Mission School Family Handbook and yearly supplements, as amended from time to time

Top Copy - School Office

Bottom Copy - Please keep for Family Records