

SAINT MATTHEW SCHOOL ENROLLMENT APPLICATION

Today's date _____

Students' name(s) _____	SS# _____	Gender	M / F	DOB _____	Enrolling Grade _____	Catholic <u>Y / N</u>
_____	SS# _____	Gender	M / F	DOB _____	Enrolling Grade _____	Catholic <u>Y / N</u>
_____	SS# _____	Gender	M / F	DOB _____	Enrolling Grade _____	Catholic <u>Y / N</u>

Students' Address _____	City _____	State _____	Zip _____
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Father's Name _____	E-mail Address _____	Home Phone _____	Business Phone _____
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Father's Address (if different than student) _____	City _____	State _____	Zip _____
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Mother's Name _____	E-mail Address _____	Home Phone _____	Business Phone _____
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Mother's Address (if different than student) _____	City _____	State _____	Zip _____
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Single Married Separated Divorced Widowed
 Student lives with: Both Parents Mother Father Guardian

How did you hear about St. Matthew School? _____