

**HOLY NAME OF JESUS SCHOOL - ENROLLMENT APPLICATION - 6325 Cromwell Place - New Orleans, LA 70118-6260**  
**PLEASE PRINT OR TYPE - ALL BLANKS MUST BE COMPLETED IN ORDER TO PROCESS APPLICATION**

LAST NAME	FIRST	MIDDLE	GRADE LEVEL ENTERING	ACADEMIC YEAR (CIRCLE ONE) 2006-2007    2007-2008    2008-2009
STREET (not P.O. Box)		PRESENT SCHOOL (or NURSERY, PRE-SCHOOL or DAY CARE PROGRAM)	PRESENT GRADE	
CITY	STATE	AT SCHOOL SINCE GRADE:	SINCE YEAR:	
PHONE (Home)	ZIP CODE	SCHOOL ADDRESS - STREET	CITY	STATE
DATE OF BIRTH	PLACE OF BIRTH (Cell)	SEX - CIRCLE ONE M-MALE    F-FEMALE	CITY	STATE
ETHNIC ORIGIN	CATHOLIC CHURCH PARISH YOU SUPPORT	IF HNJ, ENVELOPE NO.	PHONE	ZIP CODE
RELIGION	CATHOLIC CHURCH PARISH IN WHICH YOU RESIDE	DATE OF FIRST HOLY COMMUNION	PLACE	SOCIAL SECURITY #

**PLEASE RETURN COMPLETED APPLICATION WITH THE APPLICATION FEE. INCOMPLETE FORMS WILL NOT BE ACCEPTED FOR REVIEW.**  
 PLEASE SUBMIT ITEMS 1-6 WITH THE APPLICATION. THE SCHOOL WILL REQUEST ITEMS 7-10, AS APPLICABLE.

1.  BIRTH CERTIFICATE
2.  BAPTISMAL CERTIFICATE (if Catholic)
3.  IMMUNIZATION RECORDS
4.  APPLICATION FEE (\$150.00)
5.  CURRENT PICTURE
6.  SOC. SECURITY #
7.  TEACHER EVALUATION
8.  CURRENT REPORT CARD
9.  CUMULATIVE TRANSCRIPT
10.  TESTING RECORDS



ANY UNIQUE NEEDS OF STUDENT? \_\_\_\_\_

HAS STUDENT HAD EDUCATIONAL/PSYCHOLOGICAL EVALUATION?  Y  N PLEASE ATTACH (CONFIDENTIAL)

IF UNDER DOCTOR'S CARE, PLEASE EXPLAIN: \_\_\_\_\_

STUDENT'S PRIMARY LANGUAGE? \_\_\_\_\_ SPEAKS AND UNDERSTANDS ENGLISH?  Y  N READS AND UNDERSTANDS ENGLISH?  Y  N

STUDENT'S CITIZENSHIP? \_\_\_\_\_ HOW MANY OTHER CHILDREN ATTEND HNJ? \_\_\_\_\_

MOTHER'S FULL NAME	FATHER'S FULL NAME
MOTHER'S OCCUPATION & EMPLOYER	FATHER'S OCCUPATION & EMPLOYER
BUSINESS ADDRESS - STREET	BUSINESS ADDRESS - STREET
CITY	CITY
STATE	STATE
ZIP CODE	ZIP CODE
PHONE	PHONE
RELIGION	RELIGION
IS MOTHER AN HNJ ALUMNA? IF SO, WHAT YEAR?	IS FATHER AN HNJ ALUMNUS? IF SO, WHAT YEAR?

**SEE REVERSE**