



Blessed Sacrament School
720 South Church Street
Jonesboro, AR 72401

Student's Name (first and last) _____ / ____ / ____ School Year: _____
 Birth Date

Family Name _____ Religion: _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Home Telephone Number _____ email address _____

Assigned School District and Closest Public School: _____

Any health concerns (allergies, medications, etc.):

STUDENT INFORMATION

<u>First Name</u>	<u>Middle</u>	<u>Last Name</u>	<u>M/F</u>	<u>Grade</u>	<u>SSN</u>
<u>Baptismal Date</u>	<u>Reconciliation Date</u>	<u>Communion Date</u>	<u>Last School Attended</u>		

List all other school age children in the family:

<u>Last Name</u>	<u>First Name</u>	<u>Birth Date/Age</u>	<u>Grade</u>

FAMILY INFORMATION

Child(ren) live with Both Parents Father Mother Other (indicate below)

Do both parents have legal access? Yes No

*****CUSTODIAL PARENT IS REQUIRED TO PROVIDE THE SCHOOL A COPY OF ANY CUSTODY AND VISITATION DECREES ISSUED BY THE COURTS*****

Father Deceased Mother Deceased Guardians Grandparents Ward of the Court

FATHER: Married Divorced Remarried Single

 First Name Middle Last Name email

 Employer Occupation Work Phone

 Religion Church Attending

MOTHER: Married Divorced Remarried Single

 First Name Middle Last Name email

 Employer Occupation Work Phone

 Religion Church Attending

PRE-SCHOOL AGE CHILDREN

<u>Full Name</u>	<u>Age</u>	<u>Birth Date</u>

ETHNIC BACKGROUND

Asian Pacific Islander Black/African American Hispanic/Latino

Native American White/Caucasian Multiracial

Blessed Sacrament School does not discriminate in admissions, administration, or instruction of children based on race, color, ethnic origin, religion, or gender.