



SAINTS
PETER & PAUL
HIGH SCHOOL

Admissions Application

☐ STUDENT INFORMATION

Application Date: ____/____/____

Application for Grade: ____ **9** ____ **10** ____ **11** ____ **12** for School Year: _____

Applicant's Full Name: _____

Preferred Name: _____ Date of Birth: ____/____/____

Home Address: _____

City: _____ County: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Current School: _____

Religious Affiliation: _____ If Catholic, what Parish? _____

☐ PARENT/GUARDIAN INFORMATION

Parent/Guardian 1 Full Name: _____ Custodial Parent: ____ Yes ____ No

Home Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Occupation: _____ Job Title: _____

Employer: _____ Business Phone: _____

Religious Affiliation _____ Alumnus of Saints Peter and Paul? ____ Yes ____ No

Parent/Guardian 2 Full Name: _____ Custodial Parent: ____ Yes ____ No

Home Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Occupation: _____ Job Title: _____

Employer: _____ Business Phone: _____

Religious Affiliation _____ Alumnus of Saints Peter and Paul? ____ Yes ____ No

☐ **LEGACY INFORMATION** (Current or alumni family members who have attended SSPP)

Name	Current Grade or Graduation Year
_____	_____
_____	_____
_____	_____

☐ **DUPLICATE MAILING REQUEST** (If requested for non-custodial parent or guardian)

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Should this contact receive all correspondence from the school? _____ YES _____ NO (please check one)

☐ **FINANCIAL RESPONSIBILITY**

Tuition should be billed to: _____ Same as Above _____ Other (Please provide the following)

Full Name: _____

Billing Address _____

Phone: _____ Email: _____

☐ **MEDIA RELEASE**

All student and parent Information must be complete. The information requested will be used for the internal administration of Saints Peter & Paul School and for the publication of online student and parent directories through SabreNet. **If you DO NOT want this information published, please initial the box to the right.**

For the purpose of marketing the school and its activities, student pictures, artwork or written work may be used in admissions and recruitment publications and activities, social media, media releases. **If you DO NOT wish to have your child's likeness or name used in any format, please initial the box to the right.**

Saints Peter & Paul School does not discriminate on the basis of sex, race, color and/or national origin in the administration of its educational policies, admissions policies, financial assistance/scholarship programs, or other school sponsored programs.

On behalf of the applicant, I submit this *Admissions Application* to Saints Peter & Paul High School. I understand that completion of this application does not guarantee admission to Saints Peter & Paul High School.

Parent/Guardian Signature: _____ Date: ____/____/____

Applicant Signature: _____ Date: ____/____/____

Please include with this *Admissions Application* a non-refundable application fee of \$50. Checks should be made payable to: ***Saints Peter & Paul School.***

Office Use	
Date Received: ____/____/____	Application Fee (\$50) _____