

# ADMISSION APPLICATION

To be completed by parent(s)

Full name of applicant: \_\_\_\_\_  
(First) (Middle) (Last)

Residence: \_\_\_\_\_  
(Street) (City/Town) (State) (Zip) (Phone #)

Place & date of birth: \_\_\_\_\_ M  F   
Name preferred by the applicant: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Applying for grade: \_\_\_\_\_ for entrance in 20 \_\_\_\_\_ Religion: \_\_\_\_\_

Full name of father: \_\_\_\_\_ Marital status: \_\_\_\_\_  
Residence: \_\_\_\_\_  
(Street) (City/Town) (State) (Zip) (Phone)

Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Nature of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

Full name of mother: \_\_\_\_\_  
Maiden name: \_\_\_\_\_ Marital status: \_\_\_\_\_  
Residence: \_\_\_\_\_  
(Street) (City/Town) (State) (Zip) (Phone)

Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Nature of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

Names and ages of other children: \_\_\_\_\_  
\_\_\_\_\_

Has any member of the applicant's family attended Fatima? Yes  No   
Please list names, relationships and years of attendance: \_\_\_\_\_  
\_\_\_\_\_

How did you hear about Fatima? Web Page  Parish Announcement  School Recruitment  Friend   
Other: \_\_\_\_\_

Applicant's health: Is there any health issue that requires special attention: Yes  No   
If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Family health insurance: \_\_\_\_\_

Please list schools attended during the last three years:  
School: \_\_\_\_\_ Address: \_\_\_\_\_ Date(s) of Attendance: \_\_\_\_\_  
School: \_\_\_\_\_ Address: \_\_\_\_\_ Date(s) of Attendance: \_\_\_\_\_  
School: \_\_\_\_\_ Address: \_\_\_\_\_ Date(s) of Attendance: \_\_\_\_\_

Preferred language of study (grades 9-12): Portuguese  Spanish

Parish to which student belongs: \_\_\_\_\_

Person financially responsible for the student: \_\_\_\_\_

Address: \_\_\_\_\_

•An Entrance Exam is mandatory and requires a separate fee.

*I hereby make application for the enrollment of this student in Our Lady of Fatima High School, and I enclose a non-refundable Preliminary Fee of \$25.00 with the application. I understand that this will place the student's name on the Tentative List of Candidates but will **not** obligate the school or the applicant in any way.*

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_ Student E-Mail: \_\_\_\_\_

Admissions Office  
Our Lady of Fatima High School  
360 Market Street  
Warren, Rhode Island 02885  
(401)245-4449 or (401)245-4960