



SAINT JUDE CATHOLIC SCHOOL

APPLICATION FOR ADMISSION



STUDENT INFORMATION

Grade Entering: _____ School Year: 2____ - 2____

Student's Name: _____
Last Name First Name Middle Name

US Citizen: Yes No

Address of Student's Residence: _____
Street Address City, State, Zip Code

Home Phone Number: _____ Family E-mail: _____

Gender: Male Female Birth Date: ___/___/___ Birth Place: _____
Month/Day/Year City State Country

Race/Ethnicity: White Black Asian Hispanic: Yes
 American Indian Native Hawaii/Pacific Islander No
 Two or More Races Unknown

Religion: _____ Church of Attendance: _____

PREVIOUS EDUCATION

Current Grade Level: _____ Name of Most Recent School: _____

Number of Years Attended: _____ Street Address: _____
City State Zip Code

Reason for Leaving: _____

Has the student skipped a grade? Yes No If so, which grade? _____

Has the student repeated a grade? Yes No If so, which grade? _____

Has the student ever received a disciplinary action/report? Yes No

School suspension? Yes No Probation? Yes No School expulsion? Yes No

Please explain reasons for the disciplinary action/report:

MOTHER'S INFORMATION

Mrs. Ms. Miss Dr.

_____ Last Name _____ First Name _____ Middle Initial

Address: _____
Street Address City, State, Zip Code

Home Phone: _____ Mobile Phone: _____ Email Address: _____

Mother's Occupation: _____ Mother's Employer: _____

Mother's Business Phone: _____ Mother's Business Address: _____

Member of Saint Jude Parish (Y/N) _____ If NO, please name parish/church: _____

SIBLING'S INFORMATION

Name	Age	Grade	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADMISSION RULES

A non-refundable fee is required for all applications.
 I/We agree to support the school through active involvement and meeting my/our financial obligations.
 I/We agree to support and participate in the school fundraising events.
 My/Our signature below verifies that the information submitted in this application is true and accurate, and that I/We agree to the rules contained in this document. Both parents are required to sign the application, unless the school specifically permits otherwise.

_____ Father/Guardian Signature _____ Date _____ Mother/Guardian Signature _____ Date

Please return the completed application and application fee to:
 Saint Jude Catholic School, Admissions Office, 21689 Toledo Road, Boca Raton, Florida, 33433.
 For more information or an appointment, please call the Admissions Director at (561) 392-9160 ext. 1012.

*“From the **first moment** that a student sets foot in a Catholic school, he or she ought to have the impression of entering a new **environment**, one illumined by the **light of faith**, and having its own unique **characteristics**.”*

- The Religious Dimension of Education in a Catholic School, 1988

MISSION STATEMENT

At Saint Jude Catholic School we believe everyone is created and loved by God, that all students can achieve their full their full potential, and succeed as they go forth in service of others while letting their light shine.

CIVIL RIGHTS STATEMENT

Saint Jude Catholic School, 21689 Toledo Road, Boca Raton, Florida, of the Palm Beach Diocese, wishes to restate its open admissions policy. No person, on the grounds of race, color or national origin is excluded, or otherwise subjected to discrimination in receiving services at our school. Nor do we hire or assign staff on the basis of their race, color or national origin of the individuals we are to serve.

