

## New Student Application 2026-27 A New Student Application must be filled out for each child you are enrolling Family Name

Date Family Nan	ne				
Student Name		Male	Fe	male	
Last First	Middle				
AddressStreet	City		State	Zip	
Home Phone Number	Religion				
Child's Date of Birth	_ Child's Place of Birth	1			
		City	State	Country	
Grade for 25-26 (Please circle) PreK3 P	PreK4 K 1 2	3 4	5 6	7 8	
If you Selected PreK3 or PreK4 Please se M/W/F Half Day M/W/F Full D	v 1 0		M/T/W	/Th/F Full Day	
If you Selected <b>K</b> Please select one of the Half Day Hybrid (M/W/	programs below: /F Full, T/Th Half)	Full Day			
Person responsible for tuition	Re	lationship t	co child_		
Father's Name	Mother's Name				
Father's Address	Mother's Address				
Father's Cell #	Mother's Cell #				
	Mother's Email				
	Mother's Occupation_				
Father's Place of Work					
	Mother's Business Phone				
Marital Status (Circle one): Married					
Please Check this box if you do r School Directory	ot want your contact	informatio	on publis	hed in the	
(If applicable)					
Stepfather's Name	Stepmother's Name	e			
Stepfather's Address					
Stepfather's Cell #	 Stepmother's Cell =	#			
Stepfather's Occupation	Stepmother's Occupation				
Stepfather's Place of Work					
Custodial Parent					
		Bl	k/Sup. Fee p	pd	
PLEASE COMPLETE REVERSE SID	E Office u	se only	neck #		



## New Student Application 2026-27 A New Student Application must be filled out for each child you are enrolling

Are parents alumni	of St. James School? ☐ Yes	☐ No - Which Pare	nt is alumni?		
Child's Church of E City/State	Baptism	Date of	f Baptism		
Student ethnicity VONLY ONE	White, non-HispanicAfrican American		Native American Asian		
Language spoken at	t home				
Parish at which family is registered		St. Ja	St. James Envelope Number		
received in the past needed classroom s	on: Please review the list below or that they are currently recupport, select all areas that apport for additional information	eiving. To ensure that pply to your child. A	at St. James can provide the		
☐ IEP or private so	chool equivalent   504 or p	private school equiva	alent   Early Intervention		
☐ English as a Sec	ond Language   Occupat	tional Therapy 🔲 P	Physical Therapy		
☐ Speech and Lan	guage Therapy	ork or counseling se	ervices		
☐ Gifted services	☐ Other therapeutic service	ces			
List previous schoo	ls attended				
Public School child	would attend		District #		
Do you live more th	ntion to school:   Walk   Donan 1.5 miles from St. James elementary children <i>not</i> enro	School? ☐ Yes ☐ N	No		
website, yearbook, initialing and signir academic work in a	hool uses photos and/or acadadvertisements, bulletin articing below, I give permission for any format including group or	les, and other public or the school to public individual photos.	relations material). By ish my child/ren's photo or		
Parent/Guardian Sig	gnature	Date			