

St. Ignatius Parish School

3330 S.E. 43rd Avenue
Portland, OR 97206
Telephone: 503-774-5533
Fax: 503-788-1134

Principal: John Matcovich
Website: www.stignatiusschool.org
Email: office@stignatiusschool.org



APPLICATION FOR ADMISSION

This application is to be completed in full by the applicant's parent or guardian and returned to St. Ignatius School. A non-refundable fee of \$25.00 should be enclosed with the application. Upon screening of your child and acceptance to St. Ignatius School, a registration packet and \$150.00 non-refundable fee must be completed in order to secure enrollment for the coming school year.

I have been referred by a current St. Ignatius School Family (Family Name _____)

STUDENT INFORMATION Applying to Grade _____

Applicant's Name _____
Last First Middle

Birth date _____ Birthplace _____
City State

Address _____ Phone _____

City _____ State _____ Zip _____

Religion _____ Parish _____

FAMILY INFORMATION

Student lives with: Both Parents Guardian
 Father only Father/Stepmother Mother deceased
 Mother only Mother/Stepfather Father deceased

Father **Stepfather** **Guardian** (relationship _____)

Full Name _____ Religion _____

Employer _____ Position _____

Work Address _____ Work Phone _____

Cell Phone _____ Email(s) _____

Mother **Stepmother** **Guardian** (relationship _____)

Full Name _____ Religion _____

Employer _____ Position _____

Work Address _____ Work Phone _____

Cell Phone _____ Email(s) _____

If applicable, list name/address/telephone/fax of previous school:

Name _____ Phone _____

Address _____ Fax # _____

City _____ State _____ Zip _____

Reason for Transfer _____

A COPY of student records (including health, behavioral, academic, special services, attendance, and test scores) from previous school(s) MUST be attached to this application. These records may be obtained at the office of the current school.

1. Briefly explain the reasons you wish your child to be educated at St. Ignatius School.

2. Please tell about your child. Include any information on student learning needs or health related issues.

3. How/from whom did you hear about St. Ignatius School?

Current Family Advertising Website Reader Board Other _____

Parents' Signature _____ **Date** _____

For Office Use Only:	Date application received: _____	Time application received: _____
Application fee received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$ _____	Check No./Payment Type _____
Seat offered: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____	<input type="checkbox"/> Letter <input type="checkbox"/> Verbal <input type="checkbox"/> Email
Wait listed date: _____		
Family Action: Date seat accepted: _____	Date seat declined: _____	by: _____