


Enrollment Application - ARCHDIOCESE OF LOS ANGELES - Beatitudes of Our Lord School

PLEASE PROVIDE ALL APPLICABLE DOCUMENTS WITH APPLICATION. Incomplete applications will NOT be processed until <u>ALL</u> documents are submitted.			For office use only Acct # _____ Ck# _____ \$ _____			
<input type="checkbox"/> \$50 Application Fee (per each new student) <input type="checkbox"/> Signed Application <input type="checkbox"/> Immunization Records (include grade 7 Tdap, if applicable) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Home Language Survey		<input type="checkbox"/> Baptismal Certificate (if baptised) <input type="checkbox"/> Communion Certificate (if applicable) <input type="checkbox"/> Current Report Card (grades 1-8) <input type="checkbox"/> Current Standardized Testing (grades 1-8) <input type="checkbox"/> Report of Health Examination (TK and K, only)				
2020-21	<input type="checkbox"/> New Family <input type="checkbox"/> Returning Family	Student(s) live with:	<input type="checkbox"/> Both natural parents in the <u>same</u> house <input type="checkbox"/> Both natural parents in <u>different</u> houses	<input type="checkbox"/> Father Only <input type="checkbox"/> Mother Only	<input type="checkbox"/> Father/Stepmother <input type="checkbox"/> Mother/Stepfather	<input type="checkbox"/> Grandparent(s) <input type="checkbox"/> Legal Guardian(s)
Student's Primary Address / City / Zip					Family Primary Email	
Legal Father's Last Name			First		Middle	
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Deceased			Religion		Cell Phone	
Address / City / Zip (if different from above)					Home Phone	
Birthplace (City/State/Country)			Birthdate		Occupation	
Legal Mother's Last Name		Mother's Maiden Name		First		Middle
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Deceased			Religion		Cell Phone	
Address / City / Zip (if different from above)					Home Phone	
Birthplace (City/State/Country)			Birthdate		Occupation	
Legal Stepparent/Guardian's Last Name			First		Middle	
Relation to Student			Religion		Cell Phone	
Address / City / Zip (if different from above)					Home Phone	
Birthplace (City/State/Country)			Birthdate		Occupation	
Home Church			City		Church Phone	
List Parish activities you have participated in:						
Briefly state why you would like your child to attend Beatitudes of Our Lord School:						

Non-Discrimination Policy: Beatitudes of Our Lord School admits students of any race, color, national or ethnic origin to all rights, privileges, programs and activities generally accorded to and/or available to students at school.

Complete policy published on school website: www.bolschool.org

REQUIRED: Student Ethnic Origin: Multi-Racial African American Asian Filipino Hispanic Native American White/Caucasian

<input type="checkbox"/> Male <input type="checkbox"/> Female	Student Last	First	Middle
Birthdate	Birthplace	Student's First Language	Language Spoken in Home
Grade Entering	Current School	School Address	School Phone Number
Baptism Date	Church	Church Address	Church Phone Number
First Communion Date	Church	Church Address	Church Phone Number

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Birthdate	Birthplace	Student's First Learn Language	Language Spoken in Home
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First Communion Date	Church	Church Address	Church Phone Number

How did you hear about Beatitudes School? Beatitudes Church Parishioner Referred by _____ Other _____

Parent's Signature

Date

Parent's Signature

Date

