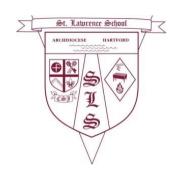
Saint Lawrence School

231 Main Street, West Haven, CT 06516
"Shaping the Leaders of Tomorrow"
Saintlawrenceschool.com
(ph) 203-933-2518 (fax) 203-933-2058



General Information: A <u>non-refundable</u> application fee must accompany the application. The amount for <u>Pre-K</u> is \$45.00. Checks should be made payable to Saint Lawrence School. A **copy of the student's Birth** Certificate, Social Security Number, Baptismal (if it applies) must accompany this application. In order for the application to be processed in a timely manner all necessary paperwork must be filled out completely. (Please print clearly.)

Pupil's Name/_		Enter	ring <u>Pre-K</u>: MF
(First) (I	Middle) (Last)		
Address	/	/	
(Street)	(City)	(State)	(Zip)
Date of Birth			
	(City)	(State)
Is Student a U.S. Citizen? Yes	No	Language spoken in the	home
Child lives with Dath Davards	Mathan Eathan	Other	
Child lives with: Both Parents	Mother Father _	Other (Relation	
Child's Social Security #	Family a mail addr	000	•
Clind's Social Security #	ranniy e-man addi		
MOTHER'S Information		FATHER	R'S Information
Name (first) (maiden) (last)		Name	(last)
Address		Address	
Home phone #		Home phone #	
Place of work		Place of work	
Work phone #		Work phone #	
TOTA PHONE II		_	
2.11.1		C 11 1 //	
Cell phone #		Cell phone #	
Cell phone #		•	
		Religion	

Other children in the lan		- C - 1	0.1	1 44 19	
Name	Age	Grade	Sch	ool attending	
Relatives who have atten	ded or are attend				
Name		List yo	ears attend	ed	
Religious Information:					
				N T (7 (1 10
Religious Information:	Child is:	: Catholic		_ Non-(Catholic
If Catholic please list paris	h(es) or church yo	our family is register	ed with		
including the envelope num	` ′	,		volono Numbor t	4
meruding the envelope hun	ilber. Farisii		FallSil Ell	velope Ivullibel 4	<u> </u>
If not Catholic, please note	denomination:				
Sacraments					
Baptismal Date		Name of Church		Town, State	
-	e your race. (Hisp		nn ethnicity Native I	and not a racist Black/African A	group).
These questions must be application.	answered careful	lly and completely.	Failure to	do so will resul	lt in anincomplete
1. Why do you wish your	child to attend Saint	Lawrence School?			
2. Does your child have a	ny physical handicap	or problem that might a	affect his/her s	chooling? If yes, pl	lease explain.
		ld be helpful to the prinds			
4. Per policy of the Archo obligations to other Catholi		cceptance of any families will call each other to			
5. Please let us know how you heard about St. Lawrence: Please check all that apply: Open HouseNewspaperWeb SiteAlumniCurrent StudentsCCD ProgramBillboardWalk-inAdvertisementOutdoor Sign					
*********	*****	*****	************	******	*****

Bus Address:A.M	P.M	No Bus Needed
After-School Program neededAppli	cation request _	
**************************************	******	*************
Pre-Kindergarten Choices		
Children must reach their 3 rd or 4 th birth3-year-old	-	han August 31 st of the current year4-year-old
(Choose a time selection below):		
3 full days 7:50 am – 2:05 pm	Or	5 full days 7:50 am – 2:05 pm
he application process, including this applica	ation is true. I u	hereby certify that the information submitted in needed and that it is determined that any
information I have provided is false, the admissistendance, he or she may be subject to immed	ssion of my chil diate expulsion.	nderstand that it is determined that any d may be revoked, or if my child is already in
information I have provided is false, the admisattendance, he or she may be subject to immed	ssion of my chil diate expulsion.	nderstand that it is determined that any d may be revoked, or if my child is already in
information I have provided is false, the admissattendance, he or she may be subject to immed Parent or Guardian Signature: Parent or Guardian Signature Saint Lawrence School is	ssion of my chil diate expulsion. a Catholi	nderstand that it is determined that any d may be revoked, or if my child is already in
Information I have provided is false, the admission of th	ssion of my chil diate expulsion. a Catholi	Date
Information I have provided is false, the admission of th	ssion of my chil diate expulsion. a Catholi	nderstand that it is determined that any defined may be revoked, or if my child is already in
Information I have provided is false, the admission attendance, he or she may be subject to immede Parent or Guardian Signature: Parent or Guardian Signature Saint Lawrence School is from different religion	ssion of my chil diate expulsion. a Catholi	Date And ethnic backgrounds. For Office Use Only Date received Registration Fee Paid Seat Deposit Paid Seat Deposit Paid
Information I have provided is false, the admissattendance, he or she may be subject to immederate and or Guardian Signature: Parent or Guardian Signature Parent or Guardian Signature Saint Lawrence School is from different religion For Office Use Only	ssion of my chil diate expulsion. a Catholi	Date Date Date Date Date Date Date Date Registration Fee Paid Date and ethnic backgrounds.