



Student Application Form 2017- 2018

St. William School 2559 N. Sayre Av. Chicago, IL 60707

Section I: Student Information

Total number of children in family enrolled in the school: _____

Names and Grades of Siblings: _____

Student Name: _____			
LAST	FIRST	MIDDLE	
Birth Date: _____	Oldest/Only Child: <input type="radio"/> YES <input type="radio"/> NO		
Gender: <input type="radio"/> MALE <input type="radio"/> FEMALE	Is this student Hispanic/Latino? <input type="radio"/> YES <input type="radio"/> NO		
Race: (Check all that apply) <input type="radio"/> ASIAN <input type="radio"/> WHITE <input type="radio"/> NATIVE AMERICAN <input type="radio"/> BLACK/AFRICAN AMERICAN <input type="radio"/> NATIVE HAWAIIAN/PACIFIC ISL. <input type="radio"/> ALASKAN NATIVE			
Country of Birth: _____		Year Immigrated (If Applicable): _____	
Grade level upon entry: _____	Religion: <input type="radio"/> CATHOLIC <input type="radio"/> NON-CATHOLIC (IDENTIFY RELIGION IF NON-CATHOLIC): _____		
Last school attended: _____		Publish address in school directory? <input type="radio"/> YES <input type="radio"/> NO	
SCHOOL NAME	SCHOOL CITY		
Student lives with: _____		PARENT/GUARDIAN INITIALS _____	
LAST NAME(S)	FIRST NAME(S)	RELATIONSHIP	
Address 1: _____		APARTMENT/UNIT # _____	
STREET ADDRESS	CITY	STATE	ZIP
Addressee 2: _____			
<i>if applicable</i> LAST NAME FIRST NAME RELATIONSHIP			
Address 2: _____		APARTMENT/UNIT # _____	
<i>if applicable</i> STREET ADDRESS			
CITY	STATE	ZIP	
Baptism: _____		DATE _____	
CHURCH			
Reconciliation: _____		DATE _____	
CHURCH			
First Communion: _____		DATE _____	
CHURCH			
Confirmation: _____		DATE _____	
CHURCH			