



NEWARK CATHOLIC HIGH SCHOOL

FAITH · KNOWLEDGE · SERVICE
www.newarkcatholic.org

NC use only	Payment
Submission Date _____	<input type="checkbox"/> Cash
Student ID # _____	<input type="checkbox"/> Check # _____

REGISTRATION FORM

The schools of the Diocese of Columbus recruit and admit students of any race, color, and national or ethnic origin to all its rights, privileges, programs, and activities. In addition, the school will not discriminate on the basis of race, color, or ethnic origin in the administration of its education programs and athletics/extracurricular activities. Furthermore, the school is not intended to be an alternative to court or administrative agency-ordered, or public school district-initiated desegregation. Ohio's Racial Nondiscriminatory Rules for Non Public Schools OCA 3301-39-01-3301-39-

Student Last Name	First Name	Middle Name	Called Name
HUDSON CAYDEN JOSEPH			
Last Name Suffix (Jr, III, etc.) <input type="checkbox"/>	Gender <input type="checkbox"/> Female Male	Ethnicity <i>(this is not required, but helps with government forms)</i> <input type="checkbox"/> African American <input type="checkbox"/> Asian American <input type="checkbox"/> American Indian <input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Multiracial
Birthdate	T-shirt Size (Adult Sm - Adult XL)	School District of Residence	County of Residence
Street Address of Residence		City	Zip
Mailing Address	<input type="checkbox"/> Same as address of residence, or:		City Zip
Primary Parent Phone		Primary Parent Email Address (please print neatly)	
Parent 1/Primary <input type="checkbox"/> Should this parent receive email and mailings?	Parent Full Name	Parent 2 <input type="checkbox"/> Should this parent receive email and mailings?	Parent Mailing Address (street, city, zip)
Address <input type="checkbox"/> Check here if same as student, or:		Address <input type="checkbox"/> Check here if same as student, or:	
Cell Phone	Work Phone	Parent Phone Contact (incl. area code)	Cell Phone Work Phone
Employment	Parent Place of Employment	Employment	
Email	Parent Email	Email	
Home Status <input type="checkbox"/> Parents married to each other <input type="checkbox"/> Parents divorced <input type="checkbox"/> Father deceased <input type="checkbox"/> Mother deceased	Student resides with: <input type="checkbox"/> Both parents, together <input type="checkbox"/> Both parents, separately <input type="checkbox"/> Parent 1 only <input type="checkbox"/> Parent 2 only	Student's custodial parent (if divorced): <input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Other	If the student resides with someone other than their parent or has a legal guardian, please provide name(s) and relationship: Custody documentation is to be kept on file and updated if there are changes.

Name of additional contact in case of emergency	Relationship to student	Phone Number
Medical Conditions <i>(please update the school office as these conditions change)</i>		
Medications taken <i>(please update the school office as these medications change)</i>		
Religion <input type="checkbox"/> Baptized <input type="checkbox"/> Catholic <input type="checkbox"/> Non-Catholic	If Catholic, what parish are you registered?	Will you be applying for tuition subsidy through this parish? <input type="checkbox"/> Yes <input type="checkbox"/> No

Educational History

Current Grade =			
	<i>8th Grade</i>	<i>7th Grade</i> <input type="checkbox"/> Same as 8th gr. or:	<i>Other schools attended, with grade levels</i>
School Name			
City, State			
Is the student currently on an IEP?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has the student received educational testing or have an ETR?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the student currently on a 504 Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has student participated in EdChoice or Jon Peterson Scholarship?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		We plan to participate in EdChoice or JPS again.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the answer to any of the previous is "yes", please provide additional details, including diagnosed disability, findings of educational testing, etc.			
Is there any additional information that we should be made aware?			
Please list parents, siblings or relatives that are Alumnus or currently attending Newark Catholic, including relationship.			

I approve and endorse this application of my son/daughter and in consideration of acceptance as a student. I hereby guarantee to Newark Catholic High School the payment of tuition and school fees and such other expenses incurred with the school. I recognize the right of the school to exclude at any time a student whose conduct or academic standing renders an undesirable presence at Newark Catholic High School.

Parent/Guardian _____ Date _____

Untitled