Westside Catholic School



Jr. High Campus • 2031 W. Michigan Street • Evansville, IN 47712 • (812) 422 - 1014
Elementary & Early Childhood Campus • 1620 Glendale Avenue • Evansville, IN 47712 • (812) 423 - 9115

Westside Catholic Enrollment Application 2023-24

FAMILY DATA

Family Name				
Parents: Together_	Separated	Divorced	Dece	ased
Child(ren) Live With:	Mother Father	Both	Other	
Father's Name			Reli	igion
Address			Phor	ne
	9)	(7:)	Cell_	
(City) Place of Employment	(State)			
Work Phone		Email		
Parish				Registered Member
Step-Parent's Name				(if applicable)
Email			Cell Phone _	
Mother's Name			Relig	gion
Address(Street)			Pho	one
				ll
` ,,				
Work Phone		Email		
Parish				Registered Member
Step-Parent's Name				(if applicable)
Email			Cell Phone _	
	MEDICA	AL / HEALTH DA [.]	ΓΔ	
Hagnital Professor			.,,	
Hospital Preference				
Doctor				
Dentist				
Any known allergies, medication	ons, special health or phy	sical needs of stu	dents	

If a parent cannot be reached, call:

(Name)			(Phone)		(Relationsh	ip)
(Name)			(Phone)		(Relationsh	ip)
List any other peo	ple allowed t	o pick up you	r child(ren):				
s there anyone no	ot allowed to	pick up your	child(ren) fror	m school? List na	ame and relat	ionship to	students
Siblings & Ages not	enrolled at W0	cs					
Do any of your child	(ren) presently	have a Service	e Plan (IEP, Spe	eech, 504,)?	Yes	No	
(Student)			(Test/Evaluation and Ας	gency Administered By)		(Date)	
(Student)			(Test/Evaluation and Ag	gency Administered By)	 	(Date)	
Parent/Guardian Si	gnature				Date_		
Parent/Guardian Si ***PLEASE PRO	7	PY OF YOUR	CHILD'S BIR				RECORD
	7	PY OF YOUR		RTH CERTIFICA			RECORD
	7	PY OF YOUR W	CHILD'S BIR ITH APPLICA STUDENT D	RTH CERTIFICA TION***			RECORD
PLEASE PRO	OVIDE A CO	PY OF YOUR W	CHILD'S BIR ITH APPLICA STUDENT D	RTH CERTIFICA TION		TISMAL F	
PLEASE PRO	OVIDE A CO	PY OF YOUR W	CHILD'S BIR ITH APPLICA STUDENT D	RTH CERTIFICA TION			RECORD
PLEASE PRO Student Full Name	OVIDE A CO	PY OF YOUR W (Fill out a	CHILD'S BIR ITH APPLICA STUDENT D complete section	RTH CERTIFICA TION ATA for each student)	TE AND BAP	TISMAL F	F
PLEASE PRO I Student Full Nan Date of Birth	DVIDE A CO	PY OF YOUR W	STUDENT D complete section (Middle Name)	RTH CERTIFICA TION PATA for each student)	TE AND BAP	TISMAL F	
***PLEASE PRO Student Full Name Oate of Birth (Mo	DVIDE A CO	PY OF YOUR W (Fill out a	STUDENT D complete section (Middle Name)	Place of Birth Student has be	(City) een retained	TISMAL F	F(State)
***PLEASE PRO 1 Student Full Name Date of Birth Age as of July 31st _ RaceW	DVIDE A CO	(Fill out a	STUDENT D complete section (Middle Name) FadeAfrican-Ai Westside Catholic	Place of Birth Student has be	(City) een retained	TISMAL F M Yes i-Racial al and ethnic orig	(State) No
***PLEASE PRO 1 Student Full Name Date of Birth Age as of July 31st Race W	DVIDE A CO	(Fill out a ay) (Year) Applying for Grantive American	CHILD'S BIR ITH APPLICA STUDENT D complete section (Middle Name) Fade African-Al Westside Catholic privileges, prog	CATA for each student) Clast) Place of Birth Student has be merican As School admits students of a	(City) een retained	TISMAL F M Yes i-Racial al and ethnic orig	(State) No in to all the righ ats or schools.

(City)

(State)

(Date)

(Church)

STUDENT DATA

(Fill out a complete section for each student)

2 Student Fu	II Name						M	F
	(Fir	st)	(Middle Name)		(Last)			-
Date of Birth _				Place of Birtl	h			
	(Month)	(Day) (Year)				City)		(State)
Age as of July	31 st	Applying for Gra	ade	Student	t has been re	etained _	Yes	No
Race _	White	_Native American	African-A	American	Asian	Multi	-Racial	
Ethnicity _	Non-Hispanic	Hispanic		ic School admits sto ograms and activitie				
Baptism	(Church)		····					
	(Church)		(City)		(State)	(Date	3)
First Communi	(Church)		(City)		(State)	(Date	9)
3 Student Fu	II Name						_ M	F
	(Fir	st)	(Middle Name)		(Last)			
Date of Birth _	(Month)	(Day) (V)		Place of Birtl	h	City)		(01-1-)
	,	(Day) (Year)			·	• /		(State)
Age as of July	31 st	Applying for Gra	ade	_ Student	t has been re	etained _	Yes	No
Race _ Ethnicity _	White Non-Hispanic	_Native AmericanHispanic	Westside Catholi	American ic School admits stograms and activitie		, color, nationa		
Baptism			L					
Баризіп	(Church)		(City)		(State)	(Date	e)
First Communi	ion							
	(Church)		(City)		(State)	(Date	э)
4 Student Fu	II Nama						М	F
· Student Fu	II Name(Fir	st)	(Middle Name)		(Last)		IVI	_
Date of Birth				Place of Birtl	h			
	(Month)	(Day) (Year)			(City)		(State)
Age as of July	31 st	Applying for Gra	ade	_ Student	t has been re	etained _	Yes	No
Race _	White	_Native American	African-A	American	Asian	Multi	-Racial	
Ethnicity _	Non-Hispanic	Hispanic		ic School admits sto ograms and activition				
Baptism	(Observab)		·····	Cit. A		(0)-1-1	<u></u>	-\
	(Church)		(City)		(State)	(Date	3)
First Communi	(Church)			City)		(State)	(Date	<u></u>
	(Church)		(Oity)		(State)	(Date	3)