



St. John Neumann Catholic High School

3000 53rd Street SW, Naples, FL 34116
(239) 455-3044 / Fax (239) 455-2966 / www.sjnceltics.org

STUDENT INFORMATION

Application for Admission to Grade _____ Date _____

Applicant's Name _____
Last First Middle

Gender: M F

Address _____
Street City State Zip

Date of Birth _____ Student's E-Mail _____

Home Phone _____ Student's Religious Affiliation _____

Student's Cell Phone _____ Parish Attending _____

STUDENT RESIDES WITH:

Both Parents []

Mother Only []

Father Only []

M/ Stepfather []

Name _____

F/ Stepmother []

Name _____

Guardian []

Name _____

ETHNICITY (OPTIONAL):

White []

Black []

Hispanic []

Asian []

Other _____

Native Language:

Please Give the [] Father [] Mother [] Parents Separated or
Following Information: Deceased Deceased Divorced

Is it permissible for non-custodial parent to receive information concerning the student? _____

Is there a court order in effect limiting the presence or removal of your student by any persons during school hours? _____

PARENT AND FAMILY INFORMATION:

Full Name of
Father _____

Occupation _____ Business Phone _____

Name of Company _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____

E-mail _____

Full Name of
Mother _____

Occupation _____ Business Phone _____

Name of
Company _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____

E-mail _____

Emergency Contact

Name _____ Relationship _____ Phone _____

Present School _____ Grade _____

Address _____
Street City State Zip

Name of Principal _____ Phone _____

List school(s) previously attended, most recent first, giving location and length of time at each.

Has the student been tested by an independent educational consultant or by other testing agencies? _____

If Yes, please describe the nature of the testing _____

Other Children In Family

Name _____ Sex ____ Birth date _____ School _____ Grade _____

Name _____ Sex ____ Birth date _____ School _____ Grade _____

Name _____ Sex ____ Birth date _____ School _____ Grade _____

Name _____ Sex ____ Birth date _____ School _____ Grade _____

Relatives who are or have attended St. John Neumann High School:

Name _____ Class _____ Relationship _____

Name _____ Class _____ Relationship _____

Grandparents' Name _____

Address _____
Street City State Zip

Grandparents' Name _____

Address _____
Street City State Zip

Are there any unusual factors in your student's life? _____

Does your student have any physical limitations, illness, disease, or physical disabilities that may affect his/her general health or participation in the school's academic, extra co-curricular or athletic life? Please describe:

Has your child even been evaluated and/or diagnosed with any type of learning disability? _____

Does your child have a student support plan, I.E.P., or 504 Plan? If so, please submit written documentation

Has your child ever been involved in any serious behavioral or criminal activities requiring disciplinary action? Please explain:

I verify that all the information above is accurate to the best of my knowledge.

I agree to abide by the rules and regulations of St. John Neumann High School and recognize, however, the right of the school to exclude at any time a student whose conduct or academic standing renders undesirable. I agree to guarantee to St. John Neumann the payment of tuition, school fees, and other expenses that may be incurred in account with the school.

Parent Signature _____ Date _____



TO BE FILLED OUT BY APPLICANT

Applicant's Name _____

Please describe your participation in extra-curricular school activities: _____

Please describe your interests and/or accomplishments: _____

Recall briefly a past experience or activity that has given you the most personal satisfaction: _____

How did you become interested in St. John Neumann High School? _____

Please tell us the reasons why you want to attend St. John Neumann High School:

Signature of Student _____