

St. Peter Chanel Application for Enrollment

Student Name: _____ (last) (first) (mi)
Parent/Guardian: _____
Grade Entering: _____ Sibling (Y/N) Name: _____
Religion: _____ Catholic Parish: _____
Address: _____ _____
Phone: _____ (daytime) (evening)

St. Peter Chanel School is open to all children regardless of race or ethnic background. In those cases in which physical limitations make it necessary to restrict the intake of students, priority shall be given in the following order:

1. Students who have completed the previous year at SPC school.
2. Siblings of students already enrolled at SPC
3. Children of active parishioners of SPC Parish
4. Children of active parishioners of other Catholic parishes who have written consent of the pastor
5. Non-Catholic students whose parents agree to allow their children to participate in the SPC's religious education program other than the actual reception of the sacraments.

**\$25 Application Fee due with application (non-refundable)
(fee is applied towards registration upon acceptance)**

TRANSFER STUDENTS MUST ALSO FILL OUT THIS SECTION:

<p style="text-align: center;">TRANSFER STUDENTS</p> <p>Transferring from: _____</p> <p>School Address: _____ _____</p> <p>School Phone #: _____</p> <p>IMPORTANT – Attached a copy of the student's latest report card.</p>
