

2023 Northwestern Ave  
Racine, WI 53154  
(262) 637-2012



JOHN PAUL II ACADEMY

**New Families (Please Print Clearly):**

Family name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Family Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Include in the Family Directory?  Yes  No

Parental Marital Status:  Married  Deceased  Separated  Divorced  Single

Child Resides With: \_\_\_\_\_ Relationship: \_\_\_\_\_

Legal Custody:  Mother  Father  Joint Custody

Are there court ordered custody restrictions on this child:  Yes  No

If yes, a copy of the court document must be on file in the school office.

Father (Guardian) Full Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother (Guardian) Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Is the Family Catholic? Father:  Yes  No Mother:  Yes  No Student:  Yes  No

Registered member of the parish?  Yes  No Another parish?  Yes  No Name: \_\_\_\_\_

**TRANSPORTATION:**

Normal Means of Transportation to School:  Bus  Car  Walking  Bicycle

Ethnicity:  American Indian  African-American  Asian  Caucasian  Eastern Indian  
 Hispanic  Multi-Racial  Middle Eastern  Pacific Islander  Other: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Grade next year \_\_\_\_\_ Date Of Birth: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_ Gender:  Male  Female  
Baptism Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Reconciliation Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
First Communion Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Grade next year \_\_\_\_\_ Date Of Birth: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_ Gender:  Male  Female  
Baptism Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Reconciliation Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
First Communion Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Grade next year \_\_\_\_\_ Date Of Birth: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_ Gender:  Male  Female  
Baptism Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Reconciliation Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
First Communion Date: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Have any of your children ever been tested or recommended for a special education or ESL program?

Yes  No Child's Name & Program: \_\_\_\_\_.

John Paul II Academy admits students of any race, color, national and national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. The school reserves the right of admittance with respect to students with special needs, since programs are not available for students with exceptional physical, emotional, or educational needs.

All students are on probation during the first semester of their attendance at a Catholic school.

All kindergarteners and all new students who have transferred from another school must submit a Birth Certificate and a Baptismal Certificate (if they have one).

**Signature of Parent:** \_\_\_\_\_

**For Office use Only:**

Received Date: \_\_\_\_\_  Check #: \_\_\_\_\_  Cash: \_\_\_\_\_  Accepted \_\_\_\_\_  
 Birth Certificate  Baptismal Certificate  EduConnect  Acceptance Letter Sent