



Diocese of Fort Wayne – South Bend

# St. Joseph School – FAMILY Enrollment

*[Please Print!]*

**Office Use Only - Last Name:**  
\_\_\_\_\_

School Year \_\_\_\_\_ Returning Family \_\_\_\_\_ New Family \_\_\_\_\_ Today's date: \_\_\_\_\_

Religion: \_\_\_\_\_ Registered Parishioners at: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

**Mother's or Guardian's Information**

\_\_\_\_\_  
First Name Last Name

\_\_\_\_ Living \_\_\_\_\_ Deceased

Education (check highest level reached):  
 \_\_\_\_ Grade School \_\_\_\_ High School \_\_\_\_ College Courses  
 \_\_\_\_ College Degree \_\_\_\_ Postgraduate

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

E-Mail Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**Father's or Guardian's Information**

\_\_\_\_\_  
First Name Last Name

\_\_\_\_ Living \_\_\_\_\_ Deceased

Education (check highest level reached):  
 \_\_\_\_ Grade School \_\_\_\_ High School \_\_\_\_ College Courses  
 \_\_\_\_ College Degree \_\_\_\_ Postgraduate

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

E-Mail Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**List Children who will attend (St. Joseph School):**

**List all other children in family:**

NAME	BIRTH DATE (mo/day/year)	AGE	NAME	BIRTH DATE (mo/day/year)	AGE
1			1		
2			2		
3			3		
4			4		
5			5		

Children live with: \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Stepmother \_\_\_\_\_ Stepfather  
 \_\_\_\_\_ Other: \_\_\_\_\_

Parents' Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Single, never married \_\_\_\_\_ Divorced\* \_\_\_\_\_ Separated\*  
 \_\_\_\_\_ Remarried\* (\* copy of custody/guardianship papers required)

Is there a language other than English often spoken in the home? \_\_\_\_\_ If yes, what? \_\_\_\_\_

Does at least one parent read English? \_\_\_\_\_ If no, what language can you read? \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_