

Parish Information

Parish: Queen of the Universe St. Frances Cabrini

NOTE: If your parish has its own designated school, please attach a letter from your pastor indicating his blessing for your child to attend HFRCs.

Sacrament	Date Rec'd.	Church	City	State
Baptism				
Penance				
Holy Eucharist				
Confirmation				

Education Information

Previous School(s) and/or Pre-School(s) Attended (beginning with current school):

- (1) _____
Current School Name City, State Phone Current Grade
- (2) _____
Previous School Name City, State Phone Grades Attended
- (3) _____
Previous School Name City, State Phone Grades Attended

Has your child had any special testing (physical, psychological, or special assessment, such as gifted/talented)? Yes No
 If yes, please explain: _____

Has your child ever been retained or skipped a grade? Yes No If yes, when? _____

Has your child ever been suspended or expelled from any school attended? Yes No

If yes, please explain: _____

We will review transcripts and grades from your child's current school. Please provide any additional information you would like us to consider. _____

Name of Person(s) Responsible for Tuition and Fees: _____

Address (if not previously noted): _____

Home Phone (if not previously noted): _____ Cell Phone (if not previously noted): _____

Email Address (if not previously noted): _____

I, the undersigned, understand that if my child is admitted to Holy Family Regional Catholic School and enrolls for the 2022-23 school year, I am obliged to pay all tuition, fees, and expenses for that year. I also understand that all registration and other fees are non-refundable. I certify that, to the best of my knowledge, the information provided above is accurate and complete.

Signature of Parent or Guardian

Date

Applications for admission to Holy Family Regional Catholic School are considered without regard to race, color, gender, or national origin.