



**JOLIET DIOCESAN SCHOOL SYSTEM**  
**Student Information Sheet**

**School:** ST. JUDE SCHOOL **City:** JOLIET  
**County:** WILL

**1. STUDENT INFORMATION:**

NAME \_\_\_\_\_ SEX: M \_\_\_\_\_ F \_\_\_\_\_  
LEGAL LAST NAME FIRST MIDDLE

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ BIRTHPLACE \_\_\_\_\_  
MONTH/DAY/YEAR CITY STATE

COMING FROM WHAT SCHOOL? \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_  
NAME OF SCHOOL

ENTRANCE DATE TO ST. JUDE \_\_\_\_\_ GRADE \_\_\_\_\_ RELIGION \_\_\_\_\_  
MONTH/DAY/YEAR

WHAT PUBLIC SCHOOL WOULD YOU ATTEND? \_\_\_\_\_ DISTRICT # \_\_\_\_\_

HOW MANY MILES DO YOU LIVE FROM ST. JUDE SCHOOL? \_\_\_\_\_ LANGUAGE SPOKEN AT HOME \_\_\_\_\_

**HOME SITUATION:** (CIRCLE THE NUMBER OF THE SITUATION THAT APPLIES)

1. Living with BOTH Parents.
2. Living with SINGLE Mother or Father (Circle one)
3. Father Not Living; Living with Mother Alone or Mother & Stepfather (Circle one)
4. Mother Not Living; Living with Father Alone or Father & Stepmother (Circle one)
5. Parents Separated; Living with Mother
6. Parents Separated; Living with Father
7. Parents Divorced; Living with Mother or Mother & Stepfather (Circle one)
8. Parents Divorced; Living with Father alone or Father & Stepmother (Circle one)
9. Living with Guardians who are relatives
10. OTHER \_\_\_\_\_
11. IF #5 through #10 is circled: Who has custodial rights? \_\_\_\_\_
12. IF #2 through #10 is circled: Who has custodial Rights? \_\_\_\_\_

**2. FATHER, STEPFATHER, GUARDIAN (Circle One) INFORMATION:** Is Dad a St. Jude Alumni? \_\_\_\_\_

NAME \_\_\_\_\_ Email: \_\_\_\_\_  
LEGAL LAST NAME FIRST MIDDLE

RELIGION \_\_\_\_\_ PARISH \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
(IF DIFFERENT FROM STUDENT'S ADDRESS)

PLACE OF BIRTH \_\_\_\_\_ EDUCATION: 8 9 10 11 12 13 14 15 BA MA PHD  
CITY STATE (CIRCLE HIGHEST GRADE COMPLETED)

CELL # \_\_\_\_\_ WORK # \_\_\_\_\_ HOME # \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_ POSITION \_\_\_\_\_

**3. MOTHER, STEPMOTHER, GUARDIAN (CIRCLE ONE) INFORMATION:** Is Mom a St. Jude Alumni? \_\_\_\_\_

NAME \_\_\_\_\_ Email: \_\_\_\_\_  
LEGAL LAST NAME FIRST MIDDLE

RELIGION \_\_\_\_\_ PARISH \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
(IF DIFFERENT FROM STUDENT'S ADDRESS)

PLACE OF BIRTH \_\_\_\_\_ EDUCATION: 8 9 10 11 12 13 14 15 BA MA PHD  
CITY STATE (CIRCLE HIGHEST GRADE COMPLETED)

CELL # \_\_\_\_\_ WORK # \_\_\_\_\_ HOME # \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_ POSITION \_\_\_\_\_

First Name of Child: \_\_\_\_\_

**SACRAMENTS**

**BAPTISM:**

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**RECONCILIATION:**

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**HOLY EUCHARIST:**

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**CONFIRMATION:**

Date \_\_\_\_\_ Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

<u>OTHER SCHOOL(S) ATTENDED</u>	<u>CITY &amp; STATE</u>	<u>GRADES</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REGISTRATION DOCUMENTS** are due on day of registration and no later than 30 days after enrollment.

- Birth Certificate
- Baptism Certificate (if applicable)
- Physical Health Exam
- Immunizations Record
- Dental Exam
- Vision Exam
- Emergency Health Form
- Parent/Student Handbook Signature Page
- Technology Use Agreement Form
- Permission for Publication of Student Images
- Student Records from previous school

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

Graduation Date: \_\_\_\_\_ OR Withdraw Date: \_\_\_\_\_

Transferred to: \_\_\_\_\_  
Name of School City State