



# NOTRE DAME ELEMENTARY SCHOOL

60 Spangenburg Avenue  
(570) 421-3651

East Stroudsburg, PA 18301  
(570) 421-2366 FAX

Website: [www.ndelementary.org](http://www.ndelementary.org)  
Email: [admissions@ndelementary.org](mailto:admissions@ndelementary.org)

## APPLICATION FOR ADMISSIONS

FULL NAME OF STUDENT: \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

PRIMARY ADDRESS: \_\_\_\_\_  
ADDRESS CITY, STATE ZIP CODE

HOME PHONE: \_\_\_\_\_ PRIMARY EMAIL: \_\_\_\_\_

GENDER: MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ ETHNICITY: \_\_\_\_\_

PREFERRED NAME: \_\_\_\_\_

### FAMILY BACKGROUND INFORMATION

Parents are: \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Re-Married \_\_\_ Single

Student lives with: \_\_\_ Parents \_\_\_ Relatives \_\_\_ Guardian(s) \_\_\_ Other \_\_\_\_\_

Is either parent deceased? YES NO If YES, please specify \_\_\_\_\_

#### Mother/ Female Guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(if different from address above)

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

Email Address: \_\_\_\_\_

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

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

#### Father/ Male Guardian:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(if different from address above)

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

Email Address: \_\_\_\_\_

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

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

Student's Present School: \_\_\_\_\_

Public or Private School  
*Please circle one*

OFFICE USE:	
TOUR: _____	SCREENING: _____
FOLLOW UP: _____	

**SIBLINGS**

Please list the names of the siblings in the family

NAME	DATE OF BIRTH	SCHOOL	GRADE 2012-13
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

**EDUCATIONAL HISTORY**

Please list all schools, which the student has attended. If this section is not applicable please indicate so below.

SCHOOL	GRADE OR YEAR ATTENDED
_____	_____
_____	_____
_____	_____
_____	_____

Has the student ever skipped or repeated a grade?                      YES                      NO  
 If yes, please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**LANGUAGE BACKGROUND**

What language(s) is/are spoken in the candidate's home? \_\_\_\_\_  
 What language(s) does the candidate speak? \_\_\_\_\_  
 What is the candidate's first-learned language? \_\_\_\_\_  
 If English is not the candidate's first language, at what age did he/she learn to speak English? \_\_\_\_\_

**OTHER**

How did to hear about Notre Dame? \_\_\_\_\_  
\_\_\_\_\_

Are you or do you have any relatives who have attended or presently attend Notre Dame?

YES                      NO  
 If YES, please list names \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Your signature below expresses your intent to apply for admission to Notre Dame Elementary School and holds the information provided in the application to be valid and truthful.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Parents or Guardians \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Person Responsible for Tuition \_\_\_\_\_ Date \_\_\_\_\_