

# ST. JOHN BOSCO SCHOOL

5630 W. Commerce Street  
San Antonio, Texas 78237

## 2011 – 2012 RE-ADMISSION

(Please print clearly or type – Complete all information requested-to be used for School Administration purposes only)

### Student Information:

Student: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade Entering: \_\_\_\_\_  
Last First Middle

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

Rank among siblings: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Primary Language spoken at home: \_\_\_\_\_

Student Living with:  Two Natural Parents  Mother & Stepfather  Father & Stepmother  Grandparent(s)  
 Mother  Father  Guardian  Other: \_\_\_\_\_

### Ethnic Group: (Check one) (For census purposes only)

1 American Indian/Native Alaskan  2 Asian  3 Black, Not Hispanic  4 Hispanic  
 5 White, Not Hispanic  6 Native Hawaiian/Pacific Islander  7 Multi Racial

### If Low-Income Family, Check applicable:

Qualifying for Free Meals  Reduced-Price Meals  Food Stamps

Residence Public School District: \_\_\_\_\_ District Code: \_\_\_\_\_

Residence Public School: \_\_\_\_\_  
(Based on student's grade list the Public Elementary or Middle school student would attend if not enrolled at St. John Bosco)

### PARENT/GUARDIAN INFORMATION:

Legal Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

Father/Guardian: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Last First Middle

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

Work Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Other #: \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Department: \_\_\_\_\_

Education:  Elementary  High School  College Hours  College Degree: List Degree(s) \_\_\_\_\_

Status:  Single  Married  Separated  Divorced  Remarried  Widow  Widower  Deceased

Religion: \_\_\_\_\_ Parish: \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Last First Middle

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

Work Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Other #: \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Department: \_\_\_\_\_

Education:  Elementary  High School  College Hours  College Degree: List Degree(s) \_\_\_\_\_

Status:  Single  Married  Separated  Divorced  Remarried  Widow  Widower  Deceased

Religion: \_\_\_\_\_ Parish: \_\_\_\_\_

### Names of all Brothers and Sister at St. John Bosco School:

Student Name	Present Grade	Date of Birth	Rank among siblings	Grade entering in August

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## 2011 – 2012 Re-admission Financial Data

FOR OFFICE USE ONLY:		Date Paid	Inv#	Pymt Method	Registration Date: _____
Re-admission Fee per Student:	\$ 175.00	_____	_____	_____	
Educational Fee per Student:	\$ 300.00	_____	_____	_____	
<b>After February 16, 2011:</b>					
Re-admission Fee per Student	\$ 250.00	_____	_____	_____	
<b>More than 30 days following Registration: (Increases \$25.00 per month until paid)</b>					
Educational Fee per Student	\$ 325.00	_____	_____	_____	

(Please print clearly or type – Complete all information requested – Do Not Alter Form)

### Student Information (List all children attending SJB in 2011-2012, oldest to the youngest):

Student Name:

Last	First	Middle	Birth Date	Grade in 2011-2012	New Student Y / N
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

### Responsible for Student Finances (If other than custodial parent):

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Last First Middle

Relationship: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Phone # Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Department: \_\_\_\_\_

### Parent / Guardian Information:

Father/Guardian: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Last First Middle

E-mail: \_\_\_\_\_

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

Phone # Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Department: \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Last First Middle

E-mail: \_\_\_\_\_

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

Phone # Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Department: \_\_\_\_\_

#### Note:

Timely payments avoid incurring late fees.

Students will be denied one or all of the following if finances are not current at anytime during the year: admission to classes; field trips; clubs; athletics; co-curricular activities.

Tuition for students enrolling after the school year started or withdrawing during the school year will be pro-rated based on the date of enrollment or withdrawal.

**\*\* Only the St. John Bosco School Finance Office handles any information or questions regarding finances. \*\***

\_\_\_\_\_  
Parent/Guardian Signature Printed Name Date