

Followers of Jesus School

PARENT APPLICATION FOR ADMISSION

Father	First Name:	Last Name:	Home Ph:	Cell Ph:
Address:		City, Zip:	Work Ph:	Pager:
Mother	First Name:	Last Name:	Home Ph:	Cell Ph:
Address: (only if different)		City, Zip:	Work Ph:	Pager:
Emergency Contact	First Name:	Last Name:	Home Ph:	Cell Ph:
Address:		City, Zip:	Work Ph:	Pager:
Employer	First Name:	Last Name:	Home Ph:	Cell Ph:
Address:		City, Zip:	Work Ph:	Pager:

Brothers and sisters of applicant(s):

Name:	Age:	Living at home?
		Yes No
		Yes No
		Yes No
		Yes No
		Yes No

Parents' religious affiliation:

Name of congregation:

Pastor:

Tuition Assistance requested?

Yes | No
