

TRANSFER APPLICATION FOR ADMISSION

Name of				
Student:	Last		First	Middle Initial
Address:				
City:		State:		Zip Code:
Home Telephone:				
Student Cell:				
Gender:	Male	Female	Date of	Birth:
Social Secur	ity#:			
Current High	School:			
Current Year	in High Sch	ool:		
Grammar Sc	hool:			
Church:				
Ethnic Origin	n (circle one):	For Statistical	Purposes	Only
African Ameri	can	Asian		Bi-racial
Caucasian (no	on Hispanic)	Hispa	nic	Native American Indian
Student's Religion:				
Distance from	m Home to N	larist (circle o	one):	

Father/Guardian Name: _____

Employer:		Title or Position:
Work Phone #:	Primary email:	Cell Phone #:

Mother/Guardian Name: _____

Employer:		Title or Position:
Work Phone #:	Primary email:	Cell phone #:

If the student's father, brother and/or sister is a graduate or current student of Marist High School, please fill in the information below:

Name	Relationship to Student	Year of Graduation

Please circle one in each category:

Parents:	Both Living	Father Decease	d Mo	ther Deceased	Both Deceased
Parent Status:	Married	Divorced	Sej	parated	Widowed
Lives With:	Parents	Father	Mother	Other:	
If separated or divorced please provide information for the second household:					
Name:					
Address:					
City:		State:		_ Zip Code:	
Home Teleph	none:				

Emergency Contact (other than parents):			
Home Phone#:			
Cell Phone#:			
Pager#:	_Work#:		

STUDENT ESSAY

On a separate sheet of paper develop an essay describing why you would like to transfer to Marist High School. Please limit this essay to 100 words and include it with the application.