



# ENROLLMENT FORM

*Sacred Heart Academy, a Catholic School founded in 1889, is committed to the mission of Jesus Christ. With our families and faith community, we provide a balanced curriculum to strengthen mind, body and spirit so each student fulfills God's purpose.*

Student Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Applying for Grade \_\_\_\_\_ For school year \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_

Present School \_\_\_\_\_ School District \_\_\_\_\_ Grade \_\_\_\_\_

School Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

School Telephone \_\_\_\_\_ Student Social Security Number \_\_\_\_\_

Federal Race Code:    \_\_\_\_ Hispanic    \_\_\_\_ American Indian/Native Alaskan    \_\_\_\_ Asian    \_\_\_\_ Other/Unknown  
                                  \_\_\_\_ Native Hawaiian/Other Pacific Islander    \_\_\_\_ African American    \_\_\_\_ Caucasian

## FAMILY INFORMATION

**Full Name of Father** \_\_\_\_\_ Marital Status \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
(If different from student)

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_  
(If different from student)

Occupation/Title \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Employer Phone \_\_\_\_\_

**Full Name of Mother** \_\_\_\_\_ Marital Status \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
(If different from student)

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_  
(If different from student)

Occupation/Title \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Employer Phone \_\_\_\_\_

**With whom does the student reside?**    Mother \_\_\_\_\_    Father \_\_\_\_\_    Both \_\_\_\_\_

Guardian \_\_\_\_\_    Guardian Name \_\_\_\_\_

**Names of brothers and sisters (if applicable):**

\_\_\_\_\_ Age \_\_\_\_\_ F \_\_\_\_\_ M \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ F \_\_\_\_\_ M \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ F \_\_\_\_\_ M \_\_\_\_\_

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**STUDENT INFORMATION**

Present Parish \_\_\_\_\_

Date of Baptism \_\_\_\_\_ Church \_\_\_\_\_ City \_\_\_\_\_

Date of First Communion \_\_\_\_\_ Church \_\_\_\_\_ City \_\_\_\_\_

**PERSONAL REFERENCES**

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

How did you find out about Sacred Heart Academy \_\_\_\_\_

\_\_\_\_\_

**SHA LEGACY**

Please list any family members (parents, grandparents, great-grandparents) who have graduated from SHA and graduation year, if known

\_\_\_\_\_

\_\_\_\_\_

This enrollment form is not binding on the applicant or upon the school. If the candidate is accepted for admission and the school is able to offer a vacancy, an acceptance letter will be forwarded. A place for the student will be reserved when a parent/school contract is signed.

Please forward this enrollment form accompanied by a \$100 per student enrollment fee, to Sacred Heart Academy. Enrollment fee goes to \$125 after July 1. The fee is nonrefundable.

1. Describe briefly your child’s school experience—successes, difficulties, relationship with teachers and peers.

\_\_\_\_\_

\_\_\_\_\_

2. Why are you considering a change of schools for your child?

\_\_\_\_\_

\_\_\_\_\_

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

**Please submit completed form and enrollment fee to:**

Sacred Heart Academy  
Mary Kay Reetz  
Admissions Director  
316 E. Michigan  
Mt. Pleasant, MI 48858