

FAMILY INFORMATION (for the Master Record)

Student Name _____ Birth date _____

Address _____ City _____ Zip _____

Phone Number _____ Place of Birth _____

Date of Birth _____ Baptized? Yes _____ No _____ City _____

Date of Baptism _____ Church _____

FAMILY DATA

Other children in the family:	Birth date
_____	_____
_____	_____
_____	_____

Father's Name _____ State of Birth _____

Educational Status _____ Occupation _____

Marital Status _____ Step Parent _____

Church Affiliation _____

Does the child reside with father? Yes _____ No _____

Mother's Name _____ State of Birth _____

Educational Status _____ Occupation _____

Marital Status _____ Step Parent _____

Church Affiliation _____

Does the child reside with mother? Yes _____ No _____

If transfer, indicate name and address of school last attended and last grade completed:

Date _____ Signature _____