



# APPLICATION FOR ADMISSION

4133 Banks Street • New Orleans, LA 70119-6883  
www.JesuitNOLA.org

For School Use Only

To Be Completed by Parent or Guardian • Please Print or Type

Application for Admission to Grade: (circle one) 8 9 10 11

School Year of Entrance 20\_\_\_\_

## STUDENT INFORMATION

Name \_\_\_\_\_ Name Student Commonly Goes By \_\_\_\_\_

Last                      First                      Middle

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ State Parish \_\_\_\_\_

Home (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Religion \_\_\_\_\_

If Catholic, Your Church Parish \_\_\_\_\_ If Not Catholic, the Catholic Church Nearest Your Home \_\_\_\_\_

Present School and Years Attended \_\_\_\_\_ Present Grade \_\_\_\_\_

Previous Schools and Years Attended \_\_\_\_\_

## FAMILY INFORMATION

	<b>Father</b>	<b>Mother</b>	<b>Guardian</b>
Full Name	First                      MI                      Last	First                      Maiden                      Last	First                      MI                      Last
Home Address	Street _____ City _____ State _____ Zip _____	Street _____ City _____ State _____ Zip _____	Street _____ City _____ State _____ Zip _____
Religion	_____	_____	_____
	Telephone ( ) _____ E-mail _____	Telephone ( ) _____ E-mail _____	Telephone ( ) _____ E-mail _____
Employer	_____	_____	_____
Business Address	Street _____ City _____ State _____ Zip _____	Street _____ City _____ State _____ Zip _____	Street _____ City _____ State _____ Zip _____
Occupation/ Title	_____ Business Telephone ( ) _____	_____ Business Telephone ( ) _____	_____ Business Telephone ( ) _____
Educational Background	High School _____ Year Graduated _____ College _____ Year Graduated _____ Degree _____	High School _____ Year Graduated _____ College _____ Year Graduated _____ Degree _____	High School _____ Year Graduated _____ College _____ Year Graduated _____ Degree _____

Student Lives With

Mother and Father   
  Mother/Stepfather (His Name) \_\_\_\_\_   
  Father/Stepmother(Her Name) \_\_\_\_\_  
 Mother Only   
  Father Only   
  Guardian   
  Other, specify \_\_\_\_\_

Check Where Appropriate

Parents Divorced   
  Parents Separated   
  Father Deceased   
  Mother Deceased

## JESUIT HISTORY

List brothers who currently attend Jesuit and give year of graduation: \_\_\_\_\_

List brothers who attended Jesuit and give year of graduation: \_\_\_\_\_

\_\_\_\_\_

Did your grandfather attend Jesuit? If yes, give name and year of graduation: \_\_\_\_\_

## SIBLINGS

Brothers			Sisters		
Name	Age	Current School	Name	Age	Current School
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## ACTIVITIES / INTERESTS / AWARDS

*(to be completed by the applicant)*

List any activities in which you currently participate: \_\_\_\_\_

\_\_\_\_\_

List any activities you wish to participate in at Jesuit: \_\_\_\_\_

List any awards you may have received: \_\_\_\_\_

\_\_\_\_\_

Would you like to take music? \_\_\_\_\_ Are you interested in joining the Blue Jay Band? \_\_\_\_\_

**Race / Origin** (Jesuit High School admits students without regard to race; however, this information is important for many reports for which the school is responsible).

\_\_\_ African American    \_\_\_ Asian    \_\_\_ Caucasian    \_\_\_ Hispanic    \_\_\_ Native American

\_\_\_ Other: \_\_\_\_\_

Your son's cumulative record to date - including the first quarter of the current school year and standardized achievement test scores - is required. These items will automatically be sent to Jesuit High School with the official archdiocesan application form distributed by, and returned to, Catholic elementary school principals. However, if your son attends a private or public elementary school, you will have to request that these items be sent to Jesuit High School; we cannot consider the application without all the information; if a student has been in several schools, please contact all schools.

\_\_\_\_\_  
Signature of Applicant

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

\_\_\_\_\_  
Date

RETURN TO: Please return this Jesuit High School application form with a \$20.00 non-refundable application fee to:  
ADMISSIONS OFFICE, JESUIT HIGH SCHOOL, 4133 BANKS ST., NEW ORLEANS, LA 70119-6883