



APPLICATION
For High School Admission
Due date: December 16, 2011

Name of Student

To: _____

Name of First-Choice High School

Name of Elementary (Jr. High) School Now Attending

Name of Second-Choice High School (Optional)

Date

Dear Eighth-Grade Applicants and Parents:

We, the Catholic High Schools of Toledo, are happy that you are considering attending one of our schools next year. We feel that we have programs to offer which are strong and which offer you a well-rounded education. Together we will help you find the best school for you within our network of schools.

The decision as to which school you would like to attend is up to you. Our common admission policy is to help you attend the school that you indicate as your first-choice. Should the school of your first-choice not be able to accept you, or should you be placed on a waiting list, a copy of this application will be forwarded to the second-choice high school.

An important part of our admission program is to have some information from you and from your school about your background. Please fill out this form and at the top of this page indicate to which high school you wish your application sent. Your teacher is asked to fill out the evaluation section for you and to send the form to the school indicated. Most of our testing and admission processing is done in the winter months.

On the day of the placement examination you should go (if at all possible) to the school of your first-choice to take the examination. On the test you will be asked to indicate your first-choice as well as your second-choice if there is one. The schools indicated will then receive copies of your scores. On the day designated for sending out acceptance letters, you will only receive a letter of acceptance from your first-choice school unless your first-choice school is unable to accept you. In that case, you will receive a letter from the school you indicate as second-choice, if that school is able to accept you. However, in any event, a school must have a copy of this form and your test scores to make a decision.

It is our hope that the above procedure aids you in finding the best school for you. Should you have any questions about our admission policy, please feel free to call us.

Sincerely yours in Christ,
Catholic Schools Office
Ph: (419) 244.6711 ext. 621

Cardinal Stritch Catholic High School
3225 Pickle Road - Oregon 43616
(Tel. No.) 419-693-0465
e-mail: admissions@cardinalstritch.org
Fax: 419-697-2816

St. Francis de Sales High School
2323 W. Bancroft - Toledo 43607
(Tel. No.) 419-531-1618
e-mail: admissions@sfsstoledo.org
Fax: 419-531-9740

Central Catholic High School
2550 Cherry Street - Toledo 43608
(Tel. No.) 419-255-2280
e-mail: admissions@centralcatholic.org
Fax: 419-259-2848 Fax: 419-861-5002

St. John's Jesuit High School
5901 Airport Highway - Toledo 43615
(Tel. No.) 419-865-5743, ext. 248
e-mail: admissions@sjjtitans.org

Notre Dame Academy
3535 Sylvania Avenue-Toledo 43623
(Tel. No.) 419-475-9359, ext. 3119
e-mail: admissions@nda.org
Fax: 419-725-1262

St. Ursula Academy
4025 Indian Road - Toledo 43606
(Tel. No.) 419-531-1693, ext. 209
e-mail: admissions@toledosua.org
Fax: 419-534-5777

TO BE COMPLETED BY THE PARENTS:

I. INFORMATION REGARDING THE STUDENT

Name _____ Family e-mail _____
Last First Middle
Address _____
Number and Street City State Zip
Birth date _____ Birthplace _____ Sex M ___ F ___
Month Day Year City State
School Now Attending _____ Public School District _____
Religion _____ Church _____

II. INFORMATION REGARDING PARENTS/GUARDIANS WITH WHOM THE STUDENT LIVES

Last Name First Middle
Home Phone: _____ Emergency Phone: _____ Cell Phone: _____
Relation: Father ___ Step-Father ___ Legal Guardian ___ Alumnus of this school Yes ___ No ___
Religion: _____ Church _____
Work _____
Company Employed by Business Address
Type of Work Business Phone Area Code Phone Number

Last Name First Middle (Maiden Name)
Home Phone _____ Emergency Phone: _____ Cell Phone: _____
Relation: Mother ___ Step-Mother ___ Legal Guardian ___ Alumna of this school Yes ___ No ___
Religion: _____ Church _____
Work _____
Company Employed by Business Address
Type of Work Business Phone Area Code Phone Number

III. INFORMATION REGARDING NON-CUSTODIAL PARENTS, IF NOT THE SAME AS THOSE LISTED ABOVE

Name _____ If deceased, when? _____
Address _____
Number and Street City State Zip
Religion: _____ Church _____
Work _____
Company Employed by Business Address
Type of Work Business Phone Area Code Phone Number

IV. MISCELLANEOUS INFORMATION

Number of brothers: older _____ younger _____ Number of sisters: older _____ younger _____
Names of relatives who are attending or have attended this high school:

_____	Relationship _____
_____	Relationship _____
_____	Relationship _____
_____	Relationship _____
_____	Relationship _____

We would like you to write your thoughts on why you are applying to this high school:

Include any comments concerning health, physical, or learning disabilities:

TO BE COMPLETED BY THE STUDENT:

- 1. Do you play a musical instrument? Yes___ No___ If so, which _____
- 2. Do you wish to continue (or begin) to play a musical instrument? Yes___ No___
- 3. Are you interested in choral work? Yes ___ No ___ Perhaps___
- 4. Are you interested in athletics? Yes ___ No ___ Perhaps ___

If yes, which sports interest you most? _____

5. What hobbies or interests do you have? _____

6. Why did you select this school? _____

7. What factors helped you choose this high school? (Rank the Top 3)

- | | |
|--|---|
| <input type="checkbox"/> academic reputation | <input type="checkbox"/> family members attended |
| <input type="checkbox"/> athletic programs | <input type="checkbox"/> financial assistance available |
| <input type="checkbox"/> Catholic beliefs | <input type="checkbox"/> friends attend |
| <input type="checkbox"/> convenient location | <input type="checkbox"/> co-ed or single sex school |
| <input type="checkbox"/> school spirit | <input type="checkbox"/> other |

8. Who made the decision to apply to this high school?

- student parents both

9. Where did you hear about the high school that you wish to attend? (✓check all that apply)

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> newspaper | <input type="checkbox"/> 8th grade school visitation |
| <input type="checkbox"/> television | <input type="checkbox"/> individual visits |
| <input type="checkbox"/> radio | <input type="checkbox"/> open house |
| <input type="checkbox"/> web site | <input type="checkbox"/> word-of-mouth |
| <input type="checkbox"/> mailings | <input type="checkbox"/> other |

To complete this application, you are asked to write your name on the enclosed form and give it to your eighth-grade teacher or counselor. Parent's signature below authorizes the release of disciplinary and academic information from the school that the student is currently attending to the Catholic high school of choice.

Applicant's Signature _____

Parent's Signature _____

Date _____