

POPE JOHN XXIII HIGH SCHOOL

APPLICATION FOR ADMISSION 2018-2019



STUDENT INFORMATION: TYPE OR PRINT CLEARLY IN BLACK INK

SEX: MALE FEMALE

NAME: _____
 LAST FIRST MIDDLE

ADDRESS: _____
 STREET CITY ZIP CODE

PHONE #: _____ LAST 4 DIGITS OF SOCIAL SECURITY: _____

STUDENT EMAIL: _____

BIRTH PLACE: _____ DATE OF BIRTH: _____

PARISH: _____ RELIGION: _____
 NAME CITY/TOWN

SCHOOL YOU NOW ATTEND: _____

SCHOOL PHONE #: _____ PRINCIPAL: _____

FAMILY INFORMATION: CHECK IF APPROPRIATE: PARENTS TOGETHER PARENTS SEPARATED
 PARENTS DIVORCED

GUARDIAN (IF APPLICABLE): _____

FATHER'S NAME: _____ MOTHER'S NAME: _____

ADDRESS: _____ ADDRESS: _____

EMAIL: _____ EMAIL: _____

PHONE: _____ PHONE: _____

OCCUPATION: _____ OCCUPATION: _____

EMPLOYER: _____ EMPLOYER: _____

NAMES AND AGES OF BROTHERS: _____

NAMES AND AGES OF SISTERS: _____

DO YOU HAVE ANY RELATIVES THAT CURRENTLY ATTEND POPE JOHN ?

NAME: _____ RELATIONSHIP: _____ GRADUATION YEAR: _____

NAME: _____ RELATIONSHIP: _____ GRADUATION YEAR: _____

NAME: _____ RELATIONSHIP: _____ GRADUATION YEAR: _____

POPE JOHN XXIII HIGH SCHOOL

APPLICATION FOR ADMISSION 2018-2019



STUDENT INTEREST:

LIST FOREIGN LANGUAGES YOU SPEAK OR HAVE STUDIED:

WHAT SPORTS/MUSIC INSTRUMENTS DO YOU PLAY?

WHAT OTHER ACTIVITIES INTEREST YOU?

PERSONALITY TRAITS: (CHECK ALL THAT BEST DESCRIBE YOU):

- | | | | | |
|--------------------------------------|--------------------------------------|--------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> FRIENDLY | <input type="checkbox"/> RESPONSIBLE | <input type="checkbox"/> SPONTANEOUS | <input type="checkbox"/> OPTIMISTIC | <input type="checkbox"/> RESERVED |
| <input type="checkbox"/> INDEPENDENT | <input type="checkbox"/> ADAPTABLE | <input type="checkbox"/> INSECURE | <input type="checkbox"/> PATIENT | <input type="checkbox"/> ACTIVE |
| <input type="checkbox"/> OUTGOING | <input type="checkbox"/> SERIOUS | <input type="checkbox"/> NEAT | <input type="checkbox"/> CALM | <input type="checkbox"/> SHY |
| <input type="checkbox"/> OPEN | <input type="checkbox"/> POLITE | <input type="checkbox"/> SENSITIVE | <input type="checkbox"/> QUICK-TEMPERED | |

WHY DO YOU WANT TO ATTEND POPE JOHN XXIII HIGH SCHOOL? WHAT CONTRIBUTIONS DO YOU FEEL YOU COULD MAKE TO THE POPE JOHN COMMUNITY?(ACADEMICS, SPORTS, ETC)

TO THE STUDENT: PLEASE PRINT YOUR NAME AND SIGN BELOW.

STUDENT NAME: _____

SIGNATURE: _____ DATE: _____

TO THE PARENT/GUARDIAN: PLEASE PRINT YOUR NAME AND SIGN BELOW.

PARENT/GUARDIAN NAME: _____

SIGNATURE: _____ DATE: _____

POPE JOHN XXIII HIGH SCHOOL

APPLICATION FOR ADMISSION 2018-2019



TEACHER/COUNSELOR RECOMMENDATION LETTER:

TO THE TEACHER/COUNSELOR: IN ORDER TO GAIN A BETTER UNDERSTANDING OF THE STUDENT, WE ASK YOU TO COMMENT ON THE APPLICANT'S GENERAL ABILITIES AND ATTITUDE TOWARD HIS/HER STUDIES, AND WHETHER YOU RECOMMEND THE STUDENT TO US. PLEASE COMPLETE THE INFORMATION BELOW AND ATTACH YOUR RECOMMENDATION LETTER, WHICH WILL BE KEPT CONFIDENTIAL.

PLEASE ATTACH 7TH AND 8TH GRADE TRANSCRIPTS AND ANY OTHER STANDARDIZED TEST SCORES INCLUDING MCAS SCORES.

NAME OF STUDENT: _____

HOW LONG HAVE YOU KNOWN THE STUDENT? _____

PLEASE DESCRIBE YOUR COURSE:

HOW DOES THIS STUDENT COMPARE TO OTHERS IN CLASS? WHAT ARE THE STUDENT'S STRENGTHS AND WEAKNESSES?

TEACHER'S/COUNSELOR'S NAME: _____

SCHOOL /PH #: _____

EMAIL ADDRESS: _____

SIGNATURE: _____ DATE: _____