

**Diocese of Worcester**  
**Central Catholic High School Application Form**  
**FY 2017 - 2018**

Please print all required information. This application should be returned to your present Diocesan Elementary school. By the signature of the Parent and or Guardian on this form, it gives permission for the student's present Diocesan Elementary School to release records to the Central Catholic High School selected.

Student's Last Name: \_\_\_\_\_  
Student's First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Student's Address: \_\_\_\_\_  
Student's City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Male: \_\_\_ Female \_\_\_ Student's Date of Birth: \_\_\_\_\_ Present Grade: \_\_\_\_\_  
Diocesan Catholic Elementary School currently attending: \_\_\_\_\_  
Student's Religion: \_\_\_\_\_  
Parish/Place of Worship: \_\_\_\_\_ City: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Occupation: \_\_\_\_\_  
Father's Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Father's email Address: \_\_\_\_\_ Father's Phone # \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Occupation: \_\_\_\_\_  
Mother's Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Mother's email Address: \_\_\_\_\_ Mother's Phone# \_\_\_\_\_

Guardian's Name (If other than Parent): \_\_\_\_\_  
Guardian's Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Guardian's email Address: \_\_\_\_\_ Guardian's Phone: \_\_\_\_\_

**If Applicable:**

Name of Legal Custodial Parent: \_\_\_\_\_  
Name of Physical Custodial Parent: \_\_\_\_\_  
Student resides with \_\_\_\_\_

Diocesan Elementary School Graduates are accepted to their school of choice provided on the basis they have completed the eighth grade at a Diocesan Catholic Elementary School, have met their 2016-2017 school year tuition obligations and have the recommendation of their Principal.

Please choose one of the following schools:

- \_\_\_\_\_ Holy Name Central Catholic Jr.-Sr. High School, Worcester, MA
- \_\_\_\_\_ St. Peter-Marian Central Catholic Jr.-Sr. High School, Worcester, MA
- \_\_\_\_\_ St. Bernard's Central Catholic High School, Fitchburg, MA
- \_\_\_\_\_ St. Mary's Jr.-Sr. High School, Worcester, MA

**Please check student's interests:**

**Band:** \_\_\_\_\_ **Musical Instruments (which):** \_\_\_\_\_  
**Chorus:** \_\_\_\_\_ **Drama:** \_\_\_\_\_ **Newspaper/Yearbook:** \_\_\_\_\_ **Language** \_\_\_\_\_ **Voice** \_\_\_\_\_  
**Dance:** \_\_\_\_\_ **Sports(which):** \_\_\_\_\_ **Theatre:** \_\_\_\_\_  
**Student Government:** \_\_\_\_\_ **Other:** \_\_\_\_\_

**Alumni/Alumnae Information:**

**Student has the following relatives (father, mother, brother, sister etc.) who have attended selected school:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **School Years Attended:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **School Years Attended:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **School Years Attended:** \_\_\_\_\_

**Please list student's siblings that are currently enrolled at selected school:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Name of Person completing this application:** \_\_\_\_\_

**Signature of Parent and or Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**This application must be returned to your present Diocesan Elementary school by November 9, 2016. By the signature of the Parent and or Guardian on this form, it gives permission for the student's present Diocesan Elementary School to release records to the Central Catholic High School selected.**