

Diocese of Worcester
Central Catholic High School Application Form
FY 2019 - 2020

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 2018-2019 school year tuition obligations and have a written recommendation from 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 Schools, 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, 2018. 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.