



# TRANSFER APPLICATION

2012-13  
SCHOOL YEAR

Nazareth Academy High School • 4001 Grant Avenue, Philadelphia PA 19114 • 215.268.1026

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Applying for Grade:

## Student Information

STUDENT'S LEGAL NAME: \_\_\_\_\_  
(Last) (First) (Middle)

PRIMARY ADDRESS: \_\_\_\_\_  
(Number, Street, Apartment No.)  
\_\_\_\_\_  
(City) (State) (Zip Code)

TELEPHONE: \_\_\_\_\_ SSN: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ CITY OF BIRTH: \_\_\_\_\_

Is the student a U.S. Citizen?  Yes  No If not, please identify your country of citizenship and the specific paperwork and/or authorizations (e.g. student visa) that permits the student to study in the U.S. \_\_\_\_\_

PRESENT SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip Code)

List any previous schools attended: \_\_\_\_\_  
*if applicable (grades 1 - 8)*  
\_\_\_\_\_

Ethnic Background? (optional)  White  African American  Asian  Native American  Latino  Indian  
 Other \_\_\_\_\_

RELIGION: \_\_\_\_\_ PARISH/CHURCH: \_\_\_\_\_

*Nazareth Academy High School admits students of any race, color, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at our school.*

## Family Information

Student lives with: \_\_\_\_\_  
*Name of Caretaker(s)*

Caretaker's Relationship to Student:  Mother & Father  Mother only  Mother & Stepfather  
 Legal Guardian(s)  Father only  Father & Stepmother  
 Grandparent(s)  Other \_\_\_\_\_

Caretaker's EMAIL: \_\_\_\_\_  
*Please provide an email address currently in use.*

*continued...*

**FATHER** DeceasedNAME: \_\_\_\_\_  
(Last) (First)Home Address \_\_\_\_\_  
(Number, Street, Apartment No.)\_\_\_\_\_  
(City, State, Zip Code)

Telephone Numbers

HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_  
(Ext.)

Marital Status

 Single  Married  Separated  
 Divorced  Re-Married  Widower

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

Work Address \_\_\_\_\_  
(Number, Street, Suite No.)\_\_\_\_\_  
(City, State, Zip Code)**MOTHER** DeceasedNAME: \_\_\_\_\_  
(Last) (First)Home Address \_\_\_\_\_  
(Number, Street, Apartment No.)\_\_\_\_\_  
(City, State, Zip Code)

Telephone Numbers

HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_  
(Ext.)

Marital Status

 Single  Married  Separated  
 Divorced  Re-Married  Widower

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

Work Address \_\_\_\_\_  
(Number, Street, Suite No.)\_\_\_\_\_  
(City, State, Zip Code)**OTHER CARETAKER/GUARDIAN** *(if applicable)*

Relationship to Student

\_\_\_\_\_

NAME: \_\_\_\_\_  
(Last) (First)Home Address \_\_\_\_\_  
(Number, Street, Apartment No.)\_\_\_\_\_  
(City, State, Zip Code)

Telephone Numbers

HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_  
(Ext.)

Marital Status

 Single  Married  Separated  
 Divorced  Re-Married  Widower

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

Work Address \_\_\_\_\_  
(Number, Street, Suite No.)\_\_\_\_\_  
(City, State, Zip Code)**OTHER CARETAKER/GUARDIAN** *(if applicable)*

Relationship to Student

\_\_\_\_\_

NAME: \_\_\_\_\_  
(Last) (First)Home Address \_\_\_\_\_  
(Number, Street, Apartment No.)\_\_\_\_\_  
(City, State, Zip Code)

Telephone Numbers

HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_  
(Ext.)

Marital Status

 Single  Married  Separated  
 Divorced  Re-Married  Widower

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

Work Address \_\_\_\_\_  
(Number, Street, Suite No.)\_\_\_\_\_  
(City, State, Zip Code)

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CUSTODY *(if applicable)*

LEGAL CUSTODY:  Joint  Sole      CUSTODIAN NAME: \_\_\_\_\_

PHYSICAL CUSTODY:  Joint  Sole      CUSTODIAN NAME: \_\_\_\_\_

***\*\*Please attach a copy of the court order with this application for our records.\*\****

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DUPLICATE MAILINGS *(if applicable)*

All school correspondence will be mailed to the student's primary address. If duplicate mailings are needed, please specify below and include address information inside this booklet.

_____ <i>(Name)</i>	_____ <i>(Relationship to Student)</i>	_____ <i>(Address)</i>
_____ <i>(Name)</i>	_____ <i>(Relationship to Student)</i>	_____ <i>(Address)</i>

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SIBLINGS

Please list any siblings, including birthdate and current school/grade/occupation.

_____ <i>(Name)</i>	_____ <i>(DOB)</i>	_____ <i>(Current School/Grade/Occupation)</i>
_____ <i>(Name)</i>	_____ <i>(DOB)</i>	_____ <i>(Current School/Grade/Occupation)</i>

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*Student Questionnaire*

List any extra-curricular activities, hobbies, sports, performances, or volunteer work you are currently involved in.

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List any academic accomplishments, awards, or distinctions you have received.

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Do you plan to attend college?  Yes  No

What is your ambition for the future?

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*continued...*

How did you become familiar with Nazareth Academy High School, e.g. website, present school, newspaper ad, current student?

Do you have any relatives who currently attend or have previously attended Nazareth Academy High School?

(Name, include Maiden, if applicable)

(Relationship to Student)

(Graduation Year)

(Name, include Maiden, if applicable)

(Relationship to Student)

(Graduation Year)

### TOWNSHIP BUSSING *(if applicable)*

If you live outside of Philadelphia, would you need township bussing?  No  Yes, School District: \_\_\_\_\_

If you live in Southern New Jersey, would you be interested in van transportation?  No  Yes

### WORLD LANGUAGES

Please indicate your first and second World Language choice.

1st Choice:  French  Italian  Latin  Spanish

2nd Choice:  French  Italian  Latin  Spanish

**The Language Choices indicated on this application are considered the student's final choice.** Preferences are granted in the order of receipt of this application as scheduling permits and based on the student's academic performance history. No changes can be made to this decision after February 1, 2012. The selected Language Choice requires a minimum of a two-year commitment of study.

### ACCOMMODATIONS\*

Has the student ever had an educational evaluation? If so, please explain the circumstances and attach a written copy to this application for the school's records.

Has the student ever required or received any academic support or accommodations? If so, please explain.

*\*Nazareth Academy High School respects and values each student's right to privacy and is dedicated to maintaining the confidentiality of student records.*

SIGNATURE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
*(Applicant)* *(Parent/Guardian)*

#### *Office Use Only*

Registration Fee \$250  (non-refundable) Amount Received: \$ \_\_\_\_\_  Cash  Check # \_\_\_\_\_  
Activity Fee \$400  Signature of Registrar: \_\_\_\_\_  
NAPA Fee \$100   
Endowment Fund \$100  Date Received: \_\_\_\_\_