

John W. Hallahan Catholic Girls' High School Registration Form

A \$100.00 registration fee must accompany this form.

APPLICATION TO (CIRCLE ONE): **GRADE 9** **GRADE 10** **GRADE 11** **GRADE 12**

STUDENT INFORMATION

Name:	Last			First	Middle Initial	Student Number	(Office use only)
Address:	City:			State:	Zip:		
Student's Email:							
Date of Birth:	Religion:						
Place of Birth:	Date of Immigration (if applicable):						
Parish:	Current School:						
Telephone:	Parent's Email:						
Ethnic Background:	<input type="checkbox"/> Caucasian	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Indian	
Language(s) Spoken at Home:	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Other				
Does the student speak English fluently?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
Is your mother, sister or grandmother a Hallahan Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					

PARENT/GUARDIAN INFORMATION

Please circle your relationship to the applicant.	Father	Stepfather	Male Legal Guardian				
Name:	Last	First	Middle Initial	Check if Father is Deceased <input type="checkbox"/>			
Place of Employment:							
Please circle your relationship to the applicant.	Mother	Stepmother	Female Legal Guardian				
Name:	Last	First	Middle Initial	Check if Mother is Deceased <input type="checkbox"/>			
Maiden Name:							
Place of Employment:							
Current Marital Status of Parents:	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced	<input type="checkbox"/> Remarried	<input type="checkbox"/> Widow	<input type="checkbox"/> Widower	<input type="checkbox"/> Single
Student Resides with:	<input type="checkbox"/> Both Parents	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Other			

SECOND PARENT INFORMATION

Parent Name:			
Parent Address:			
Telephone:	Do you wish reports mailed to this address?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Place of Employment:			

On behalf of the student, I/we hereby register to John W. Catholic Girls' High School. Enclosed is the **non-refundable** registration fee of \$100.00.

Parent Signature: _____

Date: _____

Student Signature: _____

Date: _____

John W. Hallahan Catholic Girls' High School does not discriminate on the basis of race, color, creed or national origin in the administration of its educational policies, scholarship or grant programs and/or other school sponsored programs.

ACADEMIC INFORMATION

Has the student ever been diagnosed with a learning disability?

Yes No

Has the student ever received extra academic attention?
(e.g. remedial reading, remedial math, mentally gifted program)

Yes No

If yes, please explain:

I wish to be rostered for Art as a major subject.

I wish to be rostered for Instrumental Music as a major subject. (No previous musical background required.)

I do not choose either of the above. I wish to be rostered for the Related Arts/Computer Applications Course.

NB. The requirement for Related Arts is waived for any student enrolled in the Music or Studio Art Program at John W. Hallahan Catholic Girls' High School.

Has student ever had any disciplinary difficulties in school?

Yes No

If yes, please explain:

Has student ever been on Academic Probation?

Yes No

Have there ever been any instances of involvement with civil authorities?

Yes No

If yes, please explain:

Has student ever been suspended or dismissed from any school attended?

Yes No

If yes, please explain:

CERTIFICATE OF INDIVIDUAL REQUEST FOR LOAN OF TEXTBOOKS

I hereby request of the Secretary of Education of Pennsylvania the loan of instructional materials and textbooks in accordance with Act 90 (1975), Act 195 (1972), and Act 88 (1975), for my child(ren) attending John W. Hallahan Catholic Girls' High School.

Signature of Parent/Guardian: _____

Please attach a copy of your most recent academic report card and mail registration form to:

John W. Hallahan Catholic Girls' High School
Attn: President's Office/Admissions
311 N. 19th Street
Philadelphia, PA 19103



John W. Hallahan
CATHOLIC GIRLS' HIGH SCHOOL

Failure to supply required information can impact the admission process.