

Application for Admission
Catholic High School for Boys
Little Rock, Arkansas

Student's name _____
Last First Middle

Street _____

City _____ Zip _____

Phone _____ Religion _____

If you are a Catholic, to which parish do you belong? _____

Name of parent(s) or guardian(s) with whom applicant lives:

Mr. & Mrs. _____

Father's/guardian's name _____ Occupation _____
Work number _____

Place of employment _____ Email address: _____

Mother's/guardian's name _____ Occupation _____
Work number _____

Place of employment _____ Email address: _____

If natural parents are divorced or separated please indicate _____
divorced separated

School applicant is presently attending _____

Applicant is presently in _____th grade.

Any special information you want to present:

If the student is entering 10th, 11th or 12th grade, a copy of your son's most recent transcript must be attached with application. The transcript is necessary prior to scheduling the admission interview with Mr. Straessle.

Date of application _____ Parent signature _____

(please see other side)

**PLEASE WRITE A STATEMENT EXPLAINING (1) HOW CATHOLIC HIGH SCHOOL
FOR BOYS CAME TO YOUR ATTENTION AND (2) WHY YOU WOULD LIKE TO ENROLL
YOUR SON**

(FOR SCHOOL USE ONLY)

INTERVIEW DATE: _____

Admissions Committee action: (Accepted) (Hold For Opening) (Rejected) (Accepted-Probation)