



OUR LADY OF SORROWS
PRE-K - 8
CATHOLIC ELEMENTARY SCHOOL

Our Lady of Sorrows School Application for Enrollment 2017/2018 School Year

PLEASE PRINT:

Child's Name: _____ Grade Entering: _____
Last First Middle

Child's Current Address: _____

Parent/Guardian:

Mother's full name: _____ email address: _____

Father's full name: _____ email address: _____

Married _____ Divorced _____ Separated _____ Single _____

Print parents' names as you would like it to appear on all mailings:

Mother's address, if different from children: _____

Father's address, if different from children: _____

Mother's Occupation: _____

Mother's Phone: Home: _____ Work: _____ Cell: _____

Father's Occupation: _____

Father's Phone: Home: _____ Work: _____ Cell: _____

Child's Religion: _____

Previous school attended: _____

School Address: _____

School Phone: _____

Specify any special services in previous school: _____

How did you hear of OLS: _____

Attach a copy of most recent report card and mail, with application, to:

**Our Lady of Sorrows School
Admissions Office
3800 East State St. Ext.
Mercerville, NJ 08619**