SAINT VERONICA CATHOLIC SCHOOL

Kindergarten - 8th Grade Application

2027-2028

STUDENT INFORMATION

Child's Name: _____ ☐ Male ☐ Female
Last First Middle

Address: _____ _____
Street City Zip Code Phone Number

Birthdate: _____ Place of Birth: _____
(Kindergarten, must by 5 by 9/1)

Current School: _____ _____
School Name Address City Zip Code Phone Number

U.S. Citizen? ☐ Yes ☐ No (If not, please provide a copy of the student's visa.)

Is this child proficient in English? ☐ Yes ☐ No

What is the primary language spoken at home? _____

Does this child have any special medical needs or take daily medication? ☐ Yes ☐ No

If yes, please describe: _____

Does this child have any special learning needs? ☐ Yes ☐ No

If yes, please describe: _____

Child's Race:

American Indian/Native Alaskan	Asian	Black/African American
Native Hawaiian/Pacific Islander	White	Two or more races

Child's Ethnicity:
(Circle one.)

Non-Hispanic/Latino -or- Hispanic/Latino

Per the U.S. Census Bureau, all students are counted as either Hispanic or Non-Hispanic

St. Veronica Catholic School does not unlawfully discriminate on the basis of race, color, national or ethnic origin, age, sex, or disability in the admission of students, the administration of educational policies, scholarship and loan programs, and athletic and other school-administered programs.

434 Alida Way, South San Francisco, CA 94080-4302
650-589-3909 | office@saintveronicassf.org

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FAMILY INFORMATION

Child lives with: Both parents Mother Father Other: _____

	MOTHER/GUARDIAN 1	FATHER/GUARDIAN 2
First and Last Name		
Home Address (if different from student)		
Home Phone (if different from student)		
Cell Phone		
Work Phone		
Email Address		
Occupation		
Employer Name		
Employer Address		
Religion		
Place of Birth		
U.S. Citizen	□ Yes □ No	□ Yes □ No
St. Veronica Alumni	□ Yes Year Graduated _____ □ No	□ Yes Year Graduated _____ □ No

SIBLING INFORMATION *(Please list all other children in the family.)*

Name	Age	Grade	Current School

□ Family is registered at St. Veronica Catholic Church

□ Family is registered at another parish: _____

□ Family is non-Catholic

On a separate page, please state why you wish to enroll your child at St. Veronica Catholic School and if there is anything else you feel the school should know about your family or your child that will help determine if St. Veronica Catholic School is a good educational fit for your child.

Signature: _____ Date: _____

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