

# MOTHER MCAULEY

## Liberal Arts High School

## **Transfer Application for Admission**

Name of				
Student:				
Last	Fir	st	Middle	_
Address:				
City:	S	tate:	Zip:	
Primary phone:				
Student cell phone:				
Parent email:	Student email:			
Date of Birth:	Social	Security Numbe	r:	
Current High School:		Current Year in High School:		
Elementary School Attended:				
Parish or Church:	Student's Religion:			
Ethnic Origin (circle one): For S	Statistical Purpose	s Only		
African American	Asian	Bi-racial		
Caucasian (non Hispanic)	Hispanic	Native A	merican Indian	

### Indicate (circle one) Father or Guardian

Father/Guardian Name:_		
Employer:		
Title or Position:		
		none #:
Primary Email:		
Indicate (circle one) Mo	ther or Guardian	
Mother/Guardian Name:		
Employer:		
Title or Position:		
		none #:
Primary Email:		
If the student's mother, g McAuley, please complet	randmother, sister or any other re	lative is a graduate of Mother
Name	Relationship to Student	Year of Graduation

#### **Student Essay**

On a separate sheet of paper, develop an essay describing why you wish to transfer to Mother McAuley. Please type and limit this essay to 100 words.

### Parents: Father Deceased Both Living Mother Deceased **Both Deceased** Parent Status: Married Divorced Separated Widowed Lives With: Other: Parents Father Mother If separated or divorced, please provide information for the second household: Name: City:\_\_\_\_\_\_State:\_\_\_\_\_Zip Code:\_\_\_\_\_ Primary Phone: Email: **Emergency Contact(s) (other than parents/guardians):** Name: \_\_\_\_\_\_ Home Phone #:\_\_\_\_\_ Cell Phone# \_\_\_\_\_ Work Phone #:\_\_\_\_\_\_Relationship to student : \_\_\_\_\_ **Emergency Contact(s) (other than parents/guardians):** Home Phone #:\_\_\_\_\_ Cell Phone# \_\_\_\_\_ Work Phone #:\_\_\_\_\_\_Relationship to student : \_\_\_\_\_

Please circle one in each category:



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#### **Transfer Student Disclosure Form**

Students who transfer to Mother McAuley High School must be academically qualified with no disciplinary or behavioral issues at their former school. Also all financial obligations must be met.

We, the undersigned stud	ent and parent/guardian, do here		
to release to Mather Man	ulay I limb Cabaal information ran	(Fill in name of current school)	
to release to Mother McA	uley High School information reg	arding the undersigned student.	
	<del></del>		
Student Name (Printed)	Paren	t/Guardian Name (Printed)	
Student Signature	 Paren	Parent/Guardian Signature	
otadom olgnataro	, 4.3	o Guaratan Gigilatan	
•	•	al (dean, assistant principal) who will	
then complete the remain	der and forward to admissions at	t Mother McAuley.	
Attendance:			
School Year:	# of absences	# of tardies	
School Year:	# of absences	# of tardies	
Were any absences due t	o cutting classes?	# of cuts	
Discipline:			
Did the student receive di	sciplinary action for any of the fo	llowing?	
Truancy		Yes No	
Smoking paraphernalia, c	igarettes	Yes No	

Alcohol, drugs	Yes	No		
Disrespectful behavior, verbal or nonverbal				
Use of offensive, vulgar or obscene language	Yes	No		
Disregard for school policies, procedures or authority?				
Vandalism	Yes	No		
Dishonesty	Yes	No		
(Transfer applicant packet - 5)				
Is the student leaving your school voluntarily?	Yes	No		
Comments:				
Financial:				
Are all financial obligations met?	Yes	No		
School Official Name:Title:				
Ochool Official NatricTitle				
School Official Signature: Date:				

School officials please fax completed form to admissions at 773-881-6515



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#### **Acceptance of Terms**

I understand that if accepted to Mother McAuley as a transfer student, I will be on probationary status for two semester and my academic, attendance and discipline records will be reviewed on a quarterly basis. If I fail to meet the academic and behavioral standards of the school during this time, I may be dropped from enrollment.

Transfer student applicant signature:
Parent/guardian signature
Date: