

## ARCHDIOCESE OF CHICAGO OFFICE OF CATHOLIC SCHOOLS HIGH SCHOOL PRE-ADMISSION FORM

## **GENERAL INFORMATION**

Student's Legal Name:	Date of Birth:	Sex: M F
Student's Address:		
City:	State: 2	Zip:
Home Phone:	Parent Cell Phone:	
Email Address:		
Primary language spoken at home, if not English	h:	
STUDENT'S ACADEMIC BACKGROUND - Attach	a copy of the 7th (final) & 8th Grad	e (1st sem.) Report Cards.
	to	
Elementary School	to High Sc	hool
Grades Attended: PK K 1 2 3 4 5 6 7 8	Previous School:	
Attendance this year to date:	Grades Attended: PK K 1	2 3 4 5 6 7 8
Days Absent: Times Tardy:	Home Schooled: YES	Grades:
STUDENT'S ACADEMIC HISTORY - COURSE OF S	STUDY (Check all that apply 6th - 8	8th Grade)
Pre-Algebra	ELL Instruction	
Algebra World Language	Special Education Title I	
Specify:	Other Specify:	
STUDENT'S STANDARDIZED TESTING HISTORY  ACT Aspire Date Administered:	· ·	this form - DO NOT use labe
Are the student's standardized test scores consi	istent with his/her classroom perfo	ormance? YES NO
(Explain variance)		
I/We would like to speak to a high school admissi		
If YES, contact:Pho	one: Email:	
Person Completing Form:	Position:	
Principal's' Signature:	Date	o:
We have attached Report Cards a	and Standardized Test Scores YES	NO