

ST. MALACHY SCHOOL  
340 E BELLE

ISSUED \_\_\_\_\_  
RANTOUL, IL 61866

OFFICE USE  
DATE

DATE RETURNED \_\_\_\_\_  
DATE ACCEPTED \_\_\_\_\_

**PRE-REGISTRATION KINDERGARTEN: PLEASE PRINT ALL INFORMATION**

STUDENT'S LEGAL NAME \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

APPLYING FOR GRADE \_\_\_\_\_ FOR THE \_\_\_\_\_ SCHOOL YEAR

STUDENT NICKNAME \_\_\_\_\_ DOES STUDENT HAVE AN I.E.P. FROM A PREVIOUS SCHOOL? \_\_\_\_\_

WHAT SPECIAL SERVICES HAS STUDENT RECEIVED? \_\_\_\_\_

NUMBER OF BROTHERS OLDER \_\_\_\_\_ YOUNGER \_\_\_\_\_  
NUMBER OF SISTERS OLDER \_\_\_\_\_ YOUNGER \_\_\_\_\_

**COURTHOUSE COPY OF BIRTH CERTIFICATE REQUIRED FOR PRE-REGISTRATION TO BE COMPLETE**

FATHER'S NAME \_\_\_\_\_ CATHOLIC: YES \_\_\_ NO \_\_\_  
(FIRST) (LAST) OTHER \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ CATHOLIC: YES \_\_\_ NO \_\_\_  
(FIRST) (MAIDEN) (LAST) OTHER \_\_\_\_\_

FATHER'S EMAIL ADDRESS (PLEASE PRINT)  
\_\_\_\_\_

MOTHER'S EMAIL ADDRESS (PLEASE PRINT)  
\_\_\_\_\_

ARE YOU A REGISTERED MEMBER OF ST. MALACHY PARISH? \_\_\_ YES \_\_\_ NO DATE REGISTERED \_\_\_\_\_

FATHER'S OCCUPATION \_\_\_\_\_ MOTHER'S OCCUPATION \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_



*If there is a separation/divorce/single parent situation in the family, please complete the following:*

STEP-FATHER'S NAME \_\_\_\_\_ CATHOLIC: YES \_\_\_ NO \_\_\_  
(FIRST) (LAST) OTHER \_\_\_\_\_

STEP-MOTHER'S NAME \_\_\_\_\_ CATHOLIC: YES \_\_\_ NO \_\_\_  
(FIRST) (MAIDEN) (LAST) OTHER \_\_\_\_\_

WITH WHOM DOES THE STUDENT RESIDE: NAME \_\_\_\_\_  
(FIRST) (LAST)

RELATIONSHIP \_\_\_\_\_ LEGAL GUARDIAN \_\_\_ YES \_\_\_ NO

FOR OFFICE USE ONLY		
Baptismal Certificate Verified (Y/N)	Application Status	Additional Information
Birth certificate Verified (Y/N)	1A – Siblings	_____
Parish Registration Verified (Y/N)	1B – Oldest	_____
Records Requested _____	1C – Non-Catholic	_____

SACRAMENTAL INFORMATION: Diocesan Policy requires a Baptismal Certificate on file for registration to be complete.

CATHOLIC BAPTISM:

PARTICIPATION IN FORMAL RELIGIOUS EDUCATION PROGRAMS

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_

CHURCH: \_\_\_\_\_

CHURCH: \_\_\_\_\_

CITY: \_\_\_\_\_

CITY: \_\_\_\_\_

DIOCESE: \_\_\_\_\_

DIOCESE: \_\_\_\_\_