

**SAINT FRANCIS DE SALES SCHOOL  
INTERNATIONAL STUDENT  
WAIT LIST REGISTRATION FORM**

Application Date: \_\_\_\_\_

Usual Surname: \_\_\_\_\_ Legal Surname: \_\_\_\_\_

Father's First Name: \_\_\_\_\_ Mother's First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Cell Phone # (F) \_\_\_\_\_ Cell Phone # (M) \_\_\_\_\_

Religion: \_\_\_\_\_ Child Baptized: \_\_\_\_\_ @ \_\_\_\_\_  
(Religion) (Church)

Parish: \_\_\_\_\_ S.F.D.S. Envelope # \_\_\_\_\_  
(Family Attends)

Previous School: \_\_\_\_\_

Child's First Name	Birthdate (M/D/Y)	Grade Requested

Please indicate if you have any medical concerns or special needs issues for your child:

<p>Let us get to know you! Do you have any special skills or talents? Example: computer, carpentry, electrical, sports, drama, music, food services etc.</p> <p>_____</p>
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<p><b>FOR OFFICE USE</b></p> <p>Waiting List: _____ (Date)</p>	<p>Interview Date: _____</p> <p>Accepted: _____ (Date)</p>
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