



Sr. Thea Bowman Catholic School

1217 Hattiesburg Street • Jackson, MS 39209

601- 352-5441

www.theabowmanschool.com

Admissions Application, 2011-2012

Please print or type

Last Name _____	First Name _____	Middle Name _____
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Birthdate _____	Place of Birth _____	Age, by Sept. 1st _____
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Current Address _____	City, State _____	Zip Code _____	Phone _____
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Mailing Address, if different from above

_____	_____	_____	_____
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Church Affiliation

_____	_____	_____
<i>Pastor's name</i>	<i>Church name</i>	<i>City, State</i>

Social Security # ____ - ____ - ____	Last School Attended _____	Grade applying for: _____	Child lives with: <i>Relationship</i> _____
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Non-Discrimination Policy

Sister Thea Bowman Catholic School complies with all applicable federal and state anti-discrimination laws. We admit students of any race, color, national and ethnic origin, sex, age, religion or handicapping conditions, where applicable, to all the rights, privileges, programs and activities generally accorded or made available to students at the school.

Family Information

Mother's Name _____	Home Address, if different from student _____ _____ <i>City State Zip Code</i>	Home Phone, if different from student _____
Place of Employment _____	Work Phone _____	Cellular Phone _____

Father's Name _____	Home Address, if different from student _____ _____ <i>City State Zip Code</i>	Home Phone, if different from student _____
Place of Employment _____	Work Phone _____	Cellular Phone _____

Guardian's Name <i>(if child does not live with Mother or Father)</i> _____		
Place of Employment _____	Work Phone _____	Cellular Phone _____

Brothers/Sisters

Names	Age	School Attending

Parent/Legal Guardian* Signature:

**Legal documentation required*