



Catholic Memorial School Parent Questionnaire

Admissions Office
235 Baker Street
West Roxbury
Massachusetts
02132-4395
PH: 617-469-8019
FAX: 617-325-0888

Apply online:
www.CatholicMemorial.org



Facebook.com/CatholicMemorial
Twitter: @cmadmissions

Student Information

Last name	First name	Middle name 7 8 9 10 11
Current grade	Current school	Grade applying to (circle one)
Home address		
City	State, ZIP	Primary Phone
	Date of Birth	Place of Birth
Religion	Parish/Church/Community	
Citizenship	Languages spoken at home	
Ethnicity (optional)	<input type="checkbox"/> White <input type="checkbox"/> Black or African-American <input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian <input type="checkbox"/> Native American or Alaskan Native <input type="checkbox"/> Native Hawaiian, Pacific Islander <input type="checkbox"/> Other (please specify)

Has student attended his current school for the last three years? YES NO

If not, please list prior school(s).

Parent/Guardian Information

Name of Father		<input type="checkbox"/> Deceased
Employer	Work address	Work phone
Title or Position		Email
Name of Mother		<input type="checkbox"/> Deceased
Mother's Maiden Name		
Employer	Work address	Work phone
Title or Position		Email

Are student's parents: married separated divorced single parent father remarried mother remarried

Student resides with father mother both guardian _____

Name of parent with a different address than that of student

Address Telephone

Paternal Grandparents Address

Maternal Grandparents Address

Has the student been diagnosed with A.D.D., A.D.H.D. or any learning disability? YES NO

If yes, please explain. A member of our Guidance Department may call for more information.

Does the student take any medication for medical conditions? YES NO

If yes, please explain.

Please list any siblings of the student, their ages and current schools.

Name Age Current school

Name Age Current school

Name Age Current school

Name Age Current school

Are there any CM alumni in your family? If so, please list each name, the relationship to the student, and year of graduation from CM.

Name Relationship Year of graduation

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