



STUDENT APPLICATION

For School Year 2010-2011

JOHN BAPST STUDENT APPLICATION

Students requesting first consideration should apply by March 1, 2010.
Applications will be accepted on a rolling basis until August 16, 2010.

For Office Use Only

Received _____

Postcard _____

ID Number _____

Student name _____

First Middle Last Nickname

Mailing address _____

Street Number and Street Name P.O. Box (if applicable)

City State ZIP Code

Date of birth _____ Home phone _____

Circle grade entering 9 10 11 12 Check one: ___ Male ___ Female

Town of legal residence _____ U.S. citizen? (circle one) Yes No

If transferring from another high school, give reason _____

Current school:

School name _____

Phone number _____

Mailing address _____

FOR THE STUDENT APPLICANT

(1) On a separate sheet, describe your participation in athletics, fine arts, and other extracurricular activities.

(2) Please also answer one of the following:

(a) Describe an event or circumstance in your life that has contributed to making you the person you are today.

(b) Describe one of your proudest moments.

(c) Identify a person that you admire and explain why.

(d) What would you want the admissions committee to know about you?

(e) What are your goals and what contributions would you make to John Bapst?

(3) Enclose a copy of a graded writing assignment you completed for one of this year's classes.

Student's signature

Student's name (Please print.)

Date

FOR THE PARENT/GUARDIAN

Has this student been expelled or suspended from school for disciplinary reasons or withdrawn from school before an expulsion hearing or suspension? (circle one) Yes No

If yes, attach a written statement describing the circumstances that led to the student's expulsion, suspension, or withdrawal.

By signing below, you

- apply for admission of the applicant to John Bapst Memorial High School;
- attest that the information above is correct;
- agree, if the applicant is accepted, to be responsible for any tuition and fees charged by the school not covered by your town of residence; and
- give permission to John Bapst Memorial High School to obtain health records, academic records, disciplinary records, psycho-educational evaluations or reports, educational plans, and all relevant school personnel notes concerning this student.

Parent/Guardian's signature

Parent/Guardian's name (Please print.)

Date

PARENT/GUARDIAN INFORMATION

Parent/Guardian name _____
Relationship to applicant _____
Home phone _____
Workplace & profession _____
Work phone _____
Cell phone _____
Email address _____
Calls preferred at (circle one) Home Work Cell

Parent/Guardian name _____
Relationship to applicant _____
Home phone _____
Workplace & profession _____
Work phone _____
Cell phone _____
Email address _____
Calls preferred at (circle one) Home Work Cell

Step-parent/Guardian name _____
Relationship to applicant _____
Home phone _____
Workplace & profession _____
Work phone _____
Cell phone _____
Email address _____
Calls preferred at (circle one) Home Work Cell

Step-parent/Guardian name _____
Relationship to applicant _____
Home phone _____
Workplace & profession _____
Work phone _____
Cell phone _____
Email address _____
Calls preferred at (circle one) Home Work Cell

Please list family members who have attended or are current students at John Bapst, their year of graduation, and their relationship to you.

The applicant is hereby notified that, in accordance with 20-A M.R.S.A., 6001-B, the Admissions Committee shall request all of the student's education and disciplinary records from the school from which the student is transferring. John Bapst Memorial High School may also request an oral or written report from the previous school as to whether the student has been expelled or suspended or withdrew from the school before an expulsion hearing or suspension.



JOHN BAPST MEMORIAL HIGH SCHOOL

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Fax 207-941-2474

www.johnbapst.org

John Bapst Memorial High School does not discriminate on the basis of race, color, gender, sexual orientation, religion, national origin, or disability.