



**Immaculate Heart of Mary  
SCHOOL**

**IMMACULATE HEART OF MARY SCHOOL**

1000 Alameda De Las Pulgas + Belmont, California 94002

(650) 593-4265 main + (650) 593-4342 fax

*www.ihmschoolbelmont.org*

**KINDERGARTEN APPLICATION**

Applicants are to be 5 years of age before September 1st to be considered for entrance.

Please submit the following with your completed application:

- ❖ Copies of your child's Birth and Baptismal Certificates.
- ❖ A recent family photograph

**APPLICANT INFORMATION:** Please print

**Child's Name** \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Permanent Address \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Social Security # \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth \_\_\_\_\_

Current Age \_\_\_\_\_ Gender \_\_\_\_\_ Child's Religion \_\_\_\_\_

Ethnic Heritage \_\_\_\_\_ Language/s spoken at home \_\_\_\_\_

**FAMILY INFORMATION**

**Father's Last Name** \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Birthplace \_\_\_\_\_ Religion \_\_\_\_\_ US Citizen Yes \_\_\_\_ No \_\_\_\_

Marital Status: Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_ Remarried \_\_\_\_ Widower \_\_\_\_ Single \_\_\_\_

**Mother's Last Name** \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Birthplace \_\_\_\_\_ Religion \_\_\_\_\_ US Citizen Yes \_\_\_\_ No \_\_\_\_

Marital Status: Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_ Remarried \_\_\_\_ Widower \_\_\_\_ Single \_\_\_\_

**For Office Use Only:**

Testing Fee Received \_\_\_\_ Baptismal Certificate \_\_\_\_ Birth Certificate \_\_\_\_ Family Photo \_\_\_\_ Preschool Eval. \_\_\_\_ Date App. Received \_\_\_\_

Date of Screening \_\_\_\_\_ Accepted \_\_\_\_\_ Wait Listed \_\_\_\_\_ Not Accepted \_\_\_\_\_ Registration Fee Received \_\_\_\_\_

Child lives with: Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other \_\_\_\_\_

If divorced or separated, who has custody? Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_

**SACRAMENTAL RECORD**

Roman Catholic Baptism Date \_\_\_\_\_ Church \_\_\_\_\_ City \_\_\_\_\_

Are you a registered parishioner of Immaculate Heart of Mary Church? \_\_\_\_\_

Are you registered in another Catholic Parish? \_\_\_\_\_ Name of Parish \_\_\_\_\_ City \_\_\_\_\_

**EDUCATIONAL RECORD**

Preschool your child last attended or is now attending:

Name of School \_\_\_\_\_

Address of School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please state your reasons for wanting to send your child to Immaculate Heart of Mary School.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please add any further pertinent information

\_\_\_\_\_  
\_\_\_\_\_

Are you or your spouse an alumnus of Immaculate Heart of Mary School? \_\_\_\_\_ Years attended \_\_\_\_\_

Siblings currently or previously enrolled in IHM:

Name \_\_\_\_\_ Grade/Year \_\_\_\_\_ Name \_\_\_\_\_ Grade/Year \_\_\_\_\_

Other siblings at home, names and ages \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent (Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent (Guardian)

\_\_\_\_\_  
Date

Immaculate Heart of Mary School, mindful of its mission to be witness to the love of Christ for all, admits students of any race, color, and national and/or ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at this school. Immaculate Heart of Mary School does not unlawfully discriminate on the basis of race, color, and national and/or ethnic origin in administration of educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.