

# GENERAL INSTRUCTIONS FOR COMPLETION OF PRELIMINARY PLACEMENT CARDS

Dear Parents,

Please complete this form *ASAP*. Please print or type only. Students are *NOT* to fill out this form.

- \*1. Name \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)  
(Please read note below about name.)
2. Home Address \_\_\_\_\_
3. City or Town \_\_\_\_\_ Zip Code \_\_\_\_\_
4. Parent or Guardian (Full Name) \_\_\_\_\_
5. Phone \_\_\_\_\_
6. Parish in which student *resides* \_\_\_\_\_
7. School student presently attends \_\_\_\_\_
8. Address of School \_\_\_\_\_
9. City or Town \_\_\_\_\_
10. County (in which school is located) \_\_\_\_\_
11. Check only if student is non-Catholic \_\_\_\_\_
12. Check only if student is a member of an Easter rite \_\_\_\_\_
13. Indicate the public school district in which *the student lives* \_\_\_\_\_
14. Date of Birth \_\_\_\_\_
15. Name of High School student plans to attend \_\_\_\_\_

**\* PLEASE PRINT THE NAME ABOVE ON LINE # 1 EXACTLY AS YOU WOULD LIKE IT TO APPEAR ON YOUR STUDENT'S GRADUATION DIPLOMA. PROPER NAMES ONLY, NO NICK NAMES OR SHORTENED VERSION OF THE PROPER NAME.**