



Incoming Grade \_\_\_\_\_

# ACADEMY OF OUR LADY OF PEACE

## ENROLLMENT APPLICATION

Please print all information

---

Student's name \_\_\_\_\_  
(Last) (First) (Middle)

Student's address \_\_\_\_\_  
(Number & Street) (City/State) (Zip)

Home Phone Number \_\_\_\_\_ Mother's Work Phone \_\_\_\_\_  
Father's Work Phone \_\_\_\_\_

Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_

Student lives with:  Both parents  Mother only  Father only  
 Other \_\_\_\_\_  Guardian \_\_\_\_\_

Student's birthday \_\_\_\_\_ Student's Social Security # \_\_\_\_\_

Parish \_\_\_\_\_

School presently attending \_\_\_\_\_

Did you attend the Open House?  Yes  No

Is mother Alum of OLP? Year \_\_\_\_\_ Name while attending: \_\_\_\_\_

**Do you have:**

Sister(s) currently at OLP? Name: \_\_\_\_\_  
Name: \_\_\_\_\_

Sister(s) alumna of OLP? Year \_\_\_\_\_ Name: \_\_\_\_\_  
Year \_\_\_\_\_ Name: \_\_\_\_\_

Relative(s) currently or alums of St. Augustine?  
What relation: \_\_\_\_\_

Please return at your earliest convenience a \$50.00 application fee (non-refundable) and this completed application to: Academy of Our Lady of Peace  
4860 Oregon Street  
San Diego, CA 92116  
Admissions: (619) 725-9118 ~ Fax: (619) 297-2473

---

### FOR OFFICE USE ONLY

---

DATE RECEIVED: \_\_\_\_\_

PAID: CASH CHECK # \_\_\_\_\_ SCHOOL CODE \_\_\_\_\_