

# Mission Hills School



## APPLICATION FOR ADMISSION

(To be completed by student's parents or guardian)

Applying for grade \_\_\_\_\_ Fall/Spring 20\_\_\_\_\_

Date of Application \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_\_

Student's Full Name: \_\_\_\_\_  
Last First Middle Name

Student's Primary Address: \_\_\_\_\_  
Street City State Zip

Student's Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ SSN (optional): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender: \_\_\_\_\_ M \_\_\_\_\_ F

Ethnicity: (pick from these options)

\_\_\_\_ African-American/Black

\_\_\_\_ American Indian/Alaska Native

\_\_\_\_ Hispanic/Latino/Mexican

\_\_\_\_ Pakistani

\_\_\_\_ Caucasian/White

\_\_\_\_ East Indian (India)

\_\_\_\_ Afghan

\_\_\_\_ Chinese

\_\_\_\_ Filipino

\_\_\_\_ Persian

\_\_\_\_ Japanese

\_\_\_\_ Native Hawaiian

\_\_\_\_ Korean

\_\_\_\_ Vietnamese

\_\_\_\_ Other \_\_\_\_\_

Current School: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Current School Address: \_\_\_\_\_  
Street City State Zip

Current School Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

## FAMILY INFORMATION | PARENT 1

Parent's Name: \_\_\_\_\_  
Last First

Parent's Occupation: \_\_\_\_\_ Parent's relationship to Applicant: \_\_\_\_\_

Parent's Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Parent's Employer: \_\_\_\_\_

Parent's Day Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Employer Address: \_\_\_\_\_

Parent's Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Parent's Home Address: (if other than that of Applicant)

\_\_\_\_\_  
Street City State Zip

### FAMILY INFORMATION | PARENT 2

Parent's Name: \_\_\_\_\_  
Last First

Parent's Occupation: \_\_\_\_\_ Parent's relationship to Applicant: \_\_\_\_\_

Parent's Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Parent's Employer: \_\_\_\_\_

Parent's Day Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Employer Address: \_\_\_\_\_

Parent's Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

Parent's Home Address: (if other than that of Applicant)

\_\_\_\_\_  
Street City State Zip

### FAMILY INFORMATION | STEP-PARENT OR LEGAL GUARDIAN (if applicable)

Name: \_\_\_\_\_  
Last First

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Employer Address: \_\_\_\_\_

Day Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: (if other than that of Applicant)

\_\_\_\_\_  
Street City State Zip

### FAMILY INFORMATION | OTHER

Student lives with (pick from these options):

\_\_\_\_\_ Both Parents

\_\_\_\_\_ Mother & Step-Father

\_\_\_\_\_ Guardian

\_\_\_\_\_ Mother

\_\_\_\_\_ Father & Step-Mother

\_\_\_\_\_ Grandparent(s)

\_\_\_\_\_ Father

\_\_\_\_\_ Both Parents in Different Households  
(Court Documents required)

If child is adopted, how long has he/she lived with you? \_\_\_\_\_

Names, ages, and grade in school of other children in the family

