

## CENSUS INFORMATION

All information contained herein is completely confidential. The information you submit is for official Star of the Sea and the Catholic School Department use only. **THIS FORM IS REQUIRED.**

7D = 7th Day Adventist	CO = Congregationalist	MO = Mormon
BA = Baptist	EP = Episcopalian	NO = None
BU = Buddhist	LU = Lutheran	OC = Other Christian
CA = Catholic	ME = Methodist	ON = Other Non-Christian

SCHOOL NAME <b>STAR OF THE SEA EARLY LEARNING CENTER</b>			TODAY'S DATE		STUDENT SSN													
LAST NAME		FIRST NAME		MI	BIRTHDATE	GRADE ENTERING												
HOME ADDRESS		CITY			ZIP													
HOME PHONE		CELL PHONE		RELIGION (Please enter 2-digit code from above)														
COUNTRY OF BIRTH			YEAR OF ARRIVAL, IF COUNTRY OF BIRTH IS OTHER THAN U.S.A.															
U.S. CITIZEN: ___ YES ___ NO	IF NOT U.S. CITIZEN, INDICATE STATUS (PLEASE CHECK THE STATUS THAT APPLIES) ___ IMMIGRANT ___ REFUGEE ___ NON-IMMIGRANT ___ U.S. NATIONAL (EXAMPLE: SAMOA)																	
NUMBER OF SIBLINGS: ___ # OLDER BROTHERS ___ # YOUNGER BROTHERS ___ # OLDER SISTERS ___ # YOUNGER SISTERS																		
IF CATHOLIC, PARISH: _____						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">OFFICE USE ONLY: CERTIFICATED</td> </tr> <tr> <td style="padding: 5px;">___ YES</td> <td style="padding: 5px;">___ NO</td> </tr> <tr> <td colspan="2" style="padding: 5px;"> </td> </tr> <tr> <td style="padding: 5px;">___ YES</td> <td style="padding: 5px;">___ NO</td> </tr> <tr> <td colspan="2" style="padding: 5px;"> </td> </tr> <tr> <td style="padding: 5px;">___ YES</td> <td style="padding: 5px;">___ NO</td> </tr> </table>	OFFICE USE ONLY: CERTIFICATED		___ YES	___ NO			___ YES	___ NO			___ YES	___ NO
OFFICE USE ONLY: CERTIFICATED																		
___ YES	___ NO																	
___ YES	___ NO																	
___ YES	___ NO																	
BAPTISM	DATE: _____	CHURCH: _____	CITY & STATE: _____															
FIRST	DATE: _____	CHURCH: _____	CITY & STATE: _____															
COMMUNION:	CITY & STATE: _____																	
CONFIRMATION:	DATE: _____	CHURCH: _____	CITY & STATE: _____															
ETHNIC BACKGROUND (DO NOT CHECK MORE THAN ONE)				LANGUAGE SPOKEN AT HOME (please circle all that apply):														
A <input type="checkbox"/> AMERICAN INDIAN/NATIVE ALASKAN	I <input type="checkbox"/> Korean	B CANTONESE	I KOREAN															
B <input type="checkbox"/> BLACK	J <input type="checkbox"/> Multi-Racial / Other / Unknown	F CEBUANO/VISAYAN	C MANDARIN															
C <input type="checkbox"/> CHINESE	K <input type="checkbox"/> Pacific Islander	A ENGLISH	L OTHER															
D <input type="checkbox"/> FILIPINO	L <input type="checkbox"/> Part-Hawaiian	M FRENCH	P PORTUGUESE															
E <input type="checkbox"/> HAWAIIAN	M <input type="checkbox"/> Portuguese	N GERMAN	J SAMOAN															
F <input type="checkbox"/> HISPANIC (Spanish, Cuban, Mexican, Puerto Rican)	N <input type="checkbox"/> Samoan	G HAWAIIAN	Q SPANISH															
G <input type="checkbox"/> Indo-Chinese (Cambodian, Vietnamese, Laotian)	O <input type="checkbox"/> Tongan	D ILOCANO	E TAGALOG															
H <input type="checkbox"/> Japanese	P <input type="checkbox"/> White	O ITALIAN	T TONGAN															
		H JAPANESE	K VIETNAMESE															