



Application for Admission

Today's Date: _____ Admission for School Year: _____

Student Name: _____ Class of: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____ Phone: _____

Public School District (based on residence): _____

School currently (previously) attended: _____

Name of Guidance Counselor in current school: _____

Please describe your reasons for seeking admission to Bishop Kearney:

Is either parent a graduate of Bishop Kearney or Cardinal Mooney High School?

Bishop Kearney: Mother Father

Cardinal Mooney: Mother Father

How did you hear about Bishop Kearney? Friend/Family Direct Mail

Internet/Website Radio Newspaper Jr. High Visit

Other _____

Please Return Form to: