

ENROLLMENT SURVEY FOR 2012-2013

Family Name: _____

_____ Yes, I intend to enroll my child(ren) in St. Thomas the Apostle School for the 2012-2013 school year (INCLUDE 2012 PRE-SCHOOL & KINGERGARTEN).

| STUDENT NAME | FALL 2012 GRADE |
|--------------|-----------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

_____ No, I do not intend to enroll my child(ren) in St. Thomas the Apostle School for the 2012-2013 school year.

_____ Undecided

REASON: _____

PRE PRE-SCHOOL AGE SIBLINGS

| NAME | DATE OF BIRTH |
|-------|---------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Signature _____

Date _____

(Print Family Name) _____

Please Return by Wednesday, January 18, 2012.