



St. Cornelius Catholic School Application

3330 N. Bellflower Blvd., Long Beach, CA 90808

Phone (562) 425-7813 Fax (562) 425-2743

www.stcornelius.net @stcorneliuscougars

Office use only

Tour _____ Date _____

Screened _____ Date _____

Accepted _____ Letter _____

Fee Paid _____ Date _____

__Birth __Baptismal __Immun.

Application Date ____/____/____

Grade applying for _____ School Year _____

Student Information

Last Name _____ First Name _____ Middle _____ Gender: Male ___ Female ___

Date of Birth ____/____/____ Place of Birth _____ (city, state) Religion _____

Home Address _____ City _____ Zip _____ Home Phone (____) _____

Siblings or relatives attending St. Cornelius? _____ Grade _____

Baptismal Date ____/____/____ Church _____ City _____ State _____

First Communion Date ____/____/____ Church _____ City _____ State _____

**Copies of Baptismal and First Communion certificated must be submitted at time of acceptance in order to receive discounted tuition rate.*

Previous School _____ City _____ Zip _____ Phone (____) _____

Parent/Guardian Information

Father's First Name _____ Middle _____ Last _____ Birthplace _____ Religion _____

Occupation _____ Marital Status _____ E-Mail Address _____

Cell Phone (____) _____ Work Phone (____) _____ Home Phone (____) _____

Mother's First Name _____ Maiden _____ Last _____ Birthplace _____ Religion _____

Occupation _____ Marital Status _____ E-Mail Address _____

Cell Phone (____) _____ Work Phone (____) _____ Home Number (____) _____

Is either parent an alumni of St. Cornelius? No Yes if yes, graduation year _____

Is family registered in St. Cornelius Parish? No Yes if yes, parish involvement _____ Weekly Envelope # _____

The Catholic church you live closest to _____ City _____ Zip _____