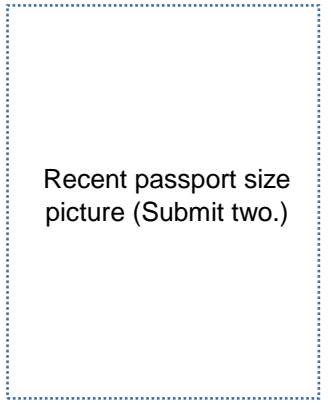


Mont Michel School, Inc.

REGISTRATION DETAILS:

- Entry Level: _____ Entry Age: ___y ___m ___d
- Date of Entry / Registration: _____
 - Birth Certificate _____
 - Baptismal Certificate
 - Alien Certificate Register (ACR) _____
 - Form 138: ORIGINAL Report Card
 - Form 137: Official Transcript of Records
 - For HS Tranferees only: Good Moral Character Cert.
 - Two (2) Recent identical passport size pictures



Learner's Reference Number

Student's Name: _____
LAST NAME FULL GIVEN NAME MIDDLE NAME

Birthday: _____ Birthplace: _____ Nickname: _____

COMPLETE Address: _____

Residence Tel. No.: _____ Religion: _____ Nationality: _____

School last Attended: _____
SCHOOL ADDRESS

Medical Information: _____
Allergies, medications, special diet, etc.

No. of Children in the Family (including student): _____ boys _____ girls Child's Ordinal Position: _____

Siblings / Relatives Currently Enrolled at MM: _____

PARENTAL INFORMATION:

FATHER

MOTHER

Complete Name: _____

Occupation: _____

Company / Organization: _____

Office Address: _____

Office Telephone No.: _____

Mobile No.: _____

E-mail Address: _____

Educational Attainment: _____

School: _____

FAMILY STATUS

All information contained herewith is STRICTLY CONFIDENTIAL.

- Child lives with: Both parents Mother is deceased.
- Mother only Father is deceased.
- Father only Parents are separated.
- Grandparents Parents are not married.
- Guardian _____ Child is adopted.

Other pertinent information: _____

Father's Signature: _____

Mother's Signature: _____

Guardian's Signature: _____

Interviewed by: _____

MM Admin

Referred by: _____

Date Accomplished: _____