

# SACRED HEART HIGH SCHOOL

## APPLICATION FOR ADMISSION

### Submit application to:

Admissions  
Sacred Heart High School  
15 N. East Avenue  
Vineland, New Jersey 08360  
(856) 691-4491  
(856) 563-1644 (Fax)  
www.shslions.com



Application Fee: \$40.00 (Non-Refundable)  
Due Date: December 30<sup>th</sup>  
Late Fee: Additional \$10.00 if submitted after December 30<sup>th</sup>

*Please type or print clearly*

### Application Information

Name \_\_\_\_\_  
*First Middle Last Nickname Gender*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_ *Phone Alternate Phone E-mail*

\_\_\_\_\_ *Date of Birth Place of Birth Social Security Number*

\_\_\_\_\_ *Religion Parish Public High School District*

Optional (check one)     African American     Hispanic     Asian American  
 Caucasian     Native American     Other

\_\_\_\_\_ *Present School Principal Guidance Counselor*

\_\_\_\_\_ *School Address*

\_\_\_\_\_ *City State Zip*

\_\_\_\_\_ *Present Grade Grade Applying For*

Has an attending child study team ever evaluated the applicant?     Yes     No

If yes, please enclose a copy of the evaluation and I.E.P. if applicable

Has the applicant had any private psychological or educational evaluations?     Yes     No

List the names of relatives who have or who are presently attending Sacred Heart High School

Name	Year	Relationship
_____	_____	_____
_____	_____	_____

**Family Information**

Father's Name \_\_\_\_\_  
*First Middle Last Nickname*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_ *Phone Alternate Phone E-mail*

Schools/Colleges Attended \_\_\_\_\_ Degree Earned \_\_\_\_\_ Year Graduated \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_ *Phone Alternate Phone E-mail*

Mother's Name \_\_\_\_\_  
*First Middle Last Nickname*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_ *Phone Alternate Phone E-mail*

Schools/Colleges Attended \_\_\_\_\_ Degree Earned \_\_\_\_\_ Year Graduated \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_ *Phone Alternate Phone E-mail*

With whom does the applicant reside? \_\_\_\_\_

Step Parent's Name \_\_\_\_\_  
*First Middle Last Nickname*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_  
*Phone Alternate Phone E-mail*

Schools/Colleges Attended \_\_\_\_\_ Degree Earned \_\_\_\_\_ Year Graduated \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_  
*Phone Alternate Phone E-mail*

Other Children in the Family

Name \_\_\_\_\_ Age \_\_\_\_\_ School/College \_\_\_\_\_

Maternal Grandparents \_\_\_\_\_  
*First Last*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_  
*Phone Alternate Phone E-mail*

Paternal Grandparents \_\_\_\_\_  
*First Last*

Address \_\_\_\_\_  
*Street City State Zip*

\_\_\_\_\_  
*Phone Alternate Phone E-mail*

**Additional Applicant Information**

List the extra-curricular activities (athletic, non-athletic and community) in which you took part in the last three years:

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What roads would you like to explore throughout your high school experience?

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Application Checklist**

Diocesan 8<sup>th</sup> Grade Students  
Application Submission

- 1. Signed Application
- 2. Request elementary school records be sent to Sacred Heart High School
- 3. \$40.00 (Non-Refundable) Fee

Public/Private 8<sup>th</sup> Grade Students  
Application Submission

- 1. Signed Application
- 2. Two letters of recommendation
- 3. Copy of transcript/grades/ standardized test scores
- 4. \$40.00 (Non-Refundable) Fee

Transfers from High School  
Application Submission

- 1. Signed Application
- 2. Two letters of recommendation
- 3. Copy of transcript/grades/ standardized test scores
- 4. \$40.00 (Non-Refundable) Fee

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