



**St. Thomas Aquinas**  
2121 Reno Drive NE  
Louisville, OH 44641  
330 875 1631

**Mr. Tim Neary**  
*Principal*

**Mrs. Teresa Caserta**  
*Assistant Principal*

**Mr. Ryan Hill**  
*Director of Admissions*

**Mr. Angelo Pederzoli**  
*Guidance Counselor*

**Mr. Nick Stanek**  
*Athletic Director*

**Mrs. Shannon Miller**  
*Business Manager*

**Website**  
[www.aquinasknights.org](http://www.aquinasknights.org)

**Twitter**  
[@stahsoh](https://twitter.com/stahsoh)

# ST. THOMAS AQUINAS APPLICATION FOR STUDENT REGISTRATION

## STUDENT DATA

Name \_\_\_\_\_  
                    First                                    Middle                                    Last  
Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
Lives with: \_\_\_ Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Legal Guardian  
Birthdate \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
Social Security # \_\_\_\_\_ Birth Place \_\_\_\_\_  
Preferred Name \_\_\_\_\_ Religion \_\_\_\_\_  
Church/Parish \_\_\_\_\_  
Current grade of child? \_\_\_\_\_ Grade child is applying for? \_\_\_\_\_  
Public school district of residence? \_\_\_\_\_

## PARENT/GUARDIAN DATA

Father's Name/Guardian \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Address (if different from student) \_\_\_\_\_  
\_\_\_\_\_  
Mother's Name/Guardian \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Address (if different from student) \_\_\_\_\_  
\_\_\_\_\_

Is either parent/guardian a graduate of St. Thomas Aquinas?  
\_\_\_ Yes \_\_\_ No

## SCHOOL LAST ATTENDED

School \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Grade at time of withdrawal \_\_\_\_\_ (if applicable)  
Reason for transfer or withdrawal (if applicable) \_\_\_\_\_  
\_\_\_\_\_  
Are there any Special Educational or Physical needs? \_\_\_ Yes \_\_\_ No

## CHECKLIST OF MATERIALS FOR APPLICATION

\_\_\_ Signed and completed application  
\_\_\_ Copy of student's most recent report card  
\_\_\_ Teacher Recommendation Form in sealed envelope  
\_\_\_ Copy of IEP/ISP, or any other special educational documents  
\_\_\_ Record request form  
\_\_\_ Legal custody documents  
\_\_\_ Tuition form

\*No application will be processed without the submission of **all** required paperwork listed above. There may be additional information needed by St. Thomas Aquinas High School and Middle School upon review of the Application for admission.

**PLEASE LIST ALL SCHOOLS PREVIOUSLY ATTENDED BY THIS STUDENT AND THE REASON FOR WITHDRAWAL**

**SCHOOL**

**YEAR**

**REASON FOR WITHDRAWAL**

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All Application Materials Received:

- \_\_\_\_\_ Medical Immunization Record
- \_\_\_\_\_ Records from all previous schools
- \_\_\_\_\_ Custody Documentation
- \_\_\_\_\_ Immigration & Naturalization Service Information
- \_\_\_\_\_ Parishioner Certification
- \_\_\_\_\_ Registration Fee
- \_\_\_\_\_ Special Educational or Physical Needs Description

By submitting this application I certify that all the above information is true and complete. I recognize and will meet my financial obligations to the school, tuition and fees that are charged for the education of my child.

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

Date \_\_\_\_\_

**FOR ADMINISTRATIVE USE ONLY**

To be signed by the Principal or Enrollment Director when all applications are received

Entry Date: \_\_\_\_\_

Principals Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return application to: 2121 Reno Dr. NE Louisville, OH 44641  
Attn: Ryan Hill**

**OFFICAL APPLICATION FORM**