Office of Admissions
5608 Pacific Ave. SE
Lacey, WA 98503
360-438-7600
www.popejp2hs.org

NON-DISCRIMINATION POLICY
Pope John Paul II High School admits students of any sex, race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school.

It does not discriminate on the basis of sex, race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, athletic programs or other school-administered programs.

FOR OFFICE USE ONLY
Application Fee: __________
Received By: _____________
Date: ____________________
Check #:payment type: _____
Student Name: ___________________________________________ Last First Middle

Nickname if preferred: ____________________ Gender: _______ Home Phone: ______________________

Home Address: ___________________________________________

Applicant Lives with (parent or parents, guardian, relative): ________________________________________

Student Email: ___________________________________________

Date of Birth: ________________________ Place of Birth: _____________________________________________

Religion: ______________________ Practicing? Yes ☐ No ☐ Place of Worship: __________________________

Ethnic Origin (check all that apply): ☐ Caucasian ☐ African-American ☐ Hispanic or Latino
☐ Alaska Native or American Indian ☐ Asian or Asian American ☐ Other __________________________

If Applicant is coming from a foreign country, complete the following:

Name of USA sponsor/guardian: _______________________________________________________

Type of Visa Applicant now holds: ______________________________________________________

Current School Attending: _____________________________________________________________ Grade: ________

School Address: _______________________________________________ Street City State Zip Code

School Phone: ______________________________

Names of those who will provide recommendation forms:

Mathematics Teacher __________________________ Science Teacher __________________________

English Teacher __________________________ Principal or Counselor _______________________

If other schools attended in the past, list the three most recent:

<table>
<thead>
<tr>
<th>School</th>
<th>City, State</th>
<th>Grade(s) Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Parent/Guardian Information
Please print or type.

**Father/Guardian** Name: __________________________________________________________________

Title: ☐ Mr. ☐ Dr. Father’s Email: ____________________________________________

Home Phone: __________ Work Phone: __________ Cell Phone: __________

Home Address: __________________________________________________________________________

Home Address (If different from student) Street

City State Zip Code

Religion: ______________________ Place of Birth: ______________________

Education: Name of High School ____________________________ Graduation Year: ______

Name of College(s) ____________________________ Dates Attended: ______

Employer: ____________________________ Position: ____________________________

If military, please indicate status: ____________________________

Stepparent name: (If applicable) ____________________________ Stepparent occupation: ____________________________

**Mother/Guardian** Name: __________________________________________________________________

Title: ☐ Mrs. ☐ Ms. ☐ Dr. Mother’s Email: ____________________________________________

Home Phone: __________ Work Phone: __________ Cell Phone: __________

Home Address: __________________________________________________________________________

Home Address (If different from student) Street

City State Zip Code

Religion: ______________________ Place of Birth: ______________________

Education: Name of High School ____________________________ Graduation Year: ______

Name of College(s) ____________________________ Dates Attended: ______

Employer: ____________________________ Position: ____________________________

If military, please indicate status: ____________________________

Stepparent name: (If applicable) ____________________________ Stepparent occupation: ____________________________

If parents are divorced or separated, to whom should admissions correspondence be sent? _______________
Student Information (Continued)

Please print or type.

Brothers and Sisters:

How did you hear about Pope John Paul II High School? __________________________________________
________________________________________________________________________________________

Activities: (Please list any activities in which you have participated in the last three years. Include school, church, sports, community, music, arts, and job. You may also include any honors or awards.)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Dates Involved</th>
<th>Activity</th>
<th>Dates Involved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you see as your unique strengths? _____________________________________________________
________________________________________________________________________________________

Parents, what do you see as your student’s unique strengths? ___________________________________
________________________________________________________________________________________

Are there any academic, social, or physical challenges of which we need to be aware? ☐ Yes ☐ No

If yes, please explain: _____________________________________________________________________
_______________________________________________________________________________________

Student Signature: _________________________________________________ Date: ________________

Parent/Guardian Signature: __________________________________________ Date: ________________

Mail completed application to: Admissions, Pope John Paul II High School, 5608 Pacific Ave. SE, Lacey, WA 98503