



**Please list all siblings (ages 21 and under) not enrolled at Sacred Heart Catholic School**

1. \_\_\_\_\_ Birthdate: \_\_\_\_\_  
2. \_\_\_\_\_ Birthdate: \_\_\_\_\_  
3. \_\_\_\_\_ Birthdate: \_\_\_\_\_  
4. \_\_\_\_\_ Birthdate: \_\_\_\_\_

**(for office use only)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> <b>Perm Rec</b>              | <input type="checkbox"/> <b>File</b>                  | <input type="checkbox"/> <b>Photo File</b>               |
| <input type="checkbox"/> <b>Fam Enroll</b>            | <input type="checkbox"/> <b>SHS Fam</b>               | <input type="checkbox"/> <b>on Class List (Roster)</b>   |
| <input type="checkbox"/> <b>Power School</b>          | <input type="checkbox"/> <b>Admission Testing</b>     | <input type="checkbox"/> <b>Attendance Log</b>           |
| <input type="checkbox"/> <b>Fam Dir</b>               | <input type="checkbox"/> <b>PPP List</b>              | <input type="checkbox"/> <b>Email List</b>               |
| <input type="checkbox"/> <b>Locker</b>                | <input type="checkbox"/> <b>MSDS</b>                  | <input type="checkbox"/> <b>Notepad</b>                  |
| <input type="checkbox"/> <b>Report Card Cover</b>     | <input type="checkbox"/> <b>MICR</b>                  | <input type="checkbox"/> <b>Inventory List</b>           |
| <input type="checkbox"/> <b>Enrollment Tally</b>      | <input type="checkbox"/> <b>Hot Lunch Tally</b>       | <input type="checkbox"/> <b>Language List</b>            |
| <input type="checkbox"/> <b>Birthday List (2)</b>     | <input type="checkbox"/> <b>Student Image</b>         | <input type="checkbox"/> <b>Kaiser School Photo List</b> |
| <input type="checkbox"/> <b>Constant Contact List</b> | <input type="checkbox"/> <b>Sign-up Genius list</b>   | <input type="checkbox"/> <b>Summer Packet</b>            |
| <input type="checkbox"/> <b>Powerschool Letter</b>    |   | <input type="checkbox"/> <b>Concussion Form given</b>    |
|   |   | <input type="checkbox"/> <b>Welcome Packet</b>           |
| <b>ID#</b> _____                                      | <b>YOG</b> _____                                      | <input type="checkbox"/> <b>ICHAT/PGC</b>                |
|   | <input type="checkbox"/> <b>Baptismal Certificate</b> | <input type="checkbox"/> <b>Concussion Form received</b> |