

Immaculate Heart of Mary School

1055 N. Alexandria Ave.

Los Angeles, CA 90029

Phone: 323.663.4611

Fax: 323-663-6216

Email: ihm1@pacbell.net

Website: www.ihmla.org



Application

Grade in Fall: _____ Date: _____

Student Information:

Last Name: _____ First: _____ Middle: _____

____ Male ____ Female Birth date: _____ Birthplace: _____

Family Information:

Father's Last Name: _____ First: _____ Middle: _____

Birthplace: _____ Religion: _____

Profession: _____ Marital Status: _____

Mother's Last Name: _____ First: _____ Middle: _____

Birthplace: _____ Religion: _____

Profession: _____ Marital Status: _____

Residence Information: *Only complete one address if parents live in the same household.*

Father's Address: _____ City: _____ State: _____ Zip code: _____

Mother's Address: _____ City: _____ State: _____ Zip code: _____

Home Phone-Mother: _____ Cell-Mother: _____ Email - Mother: _____

Home Phone - Father: _____ Cell - Father: _____ Email - Father: _____

Name of Parish of residence: _____ City: _____

Name of brothers/sisters presently enrolled at Immaculate Heart of Mary School:

Name of school your child presently attends or last attended: _____

Address: _____

Sacramental Information:

Baptism: Date: _____ Church: _____

City: _____ State: _____

First Communion: Date: _____ Church: _____

City: _____ State: _____

Other Questions:

Why are you interested in bringing your child/ren to Immaculate Heart of Mary School? _____

How are you involved in your parish and/or school now? _____

Are you committed to becoming involved in the activities of the PTA and participating in fundraising events? If so, how? _____

Share your ideas of ways in which you expect to support IHM School. _____

How did you find out about IHM? If you were referred by someone, please give us their first and last name. _____

Acceptance is determined when the application is complete, a current report card is submitted, and an assessment is completed and evaluated. Notification will come by mail/phone within the week of assessment.

If there are any court orders pertaining to your child/ren, we need to have a copy of such orders at school or we are unable to enforce them.

Parent/Guardian Signature Date

Print child's Name: _____ Grade: _____

Print child's Name: _____ Grade: _____

Print child's Name: _____ Grade: _____