



2024-2025 Application for Admission

Applicant's Name:

Home Address:

City:

State:

Zip:

County:

Telephone Number:

Cell Phone:

Date of Birth (mm/dd/yyyy):

Birth Place:

Applicant's Email Address:

Current School (Grammar/Middle/High School):

Current School Address (LINE 1):

Current School Address (LINE 2):

City:

State:

Zip:

County:

Family Information

Parent/Guardian's Email Address:

Mother's Full Name:

Mother's Home Address (if different):

City:

State:

Zip:

County:

Mother's Email Address:

Mother's Occupation:

Business Name:

Father's Full Name:

Father's Home Address (if different):

City:

State:

Zip:

County:

Father's Email Address:

Father's Occupation:

Business Name:

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List any siblings or parents who have attended Roselle Catholic/Girls' Catholic or are currently attending Roselle Catholic:

Name	Year of Graduation	Relationship
1.		
2.		
3.		

RC Career Tracks

Are you interested in the following programs?

Health Pro Program: Yes No

Coding/Engineering Program: Yes No

Educational Needs

Has the applicant been evaluated by a Child Study Team? Yes No

If yes, when?

Does your child have an IEP/ISP? Yes No

(Must have IEP/ISP on file to be placed in the FOCUS Room)

Please include a copy of the IEP/ISP with all academic records.

Signatures

Parent/Guardian's Signature:

Applicant's Signature:

Submit Application to:

Office of Admissions
Roselle Catholic High School
350 Raritan Road
Roselle, NJ 07203

Please make certain that your current school sends the following:

1. 6th and 7th grade Final Marks
2. 6th and 7th grade Standardized Test Scores
3. 8th grade First Trimester or First Marketing Period grades