



CHRIST THE KING SCHOOL

617 N. Arden Blvd. Los Angeles, CA 90004 • (323)462-4753 • principal@cksla.org

STUDENT INFORMATION

Applying for Grade: _____

Female

Male

Catholic

Non-Catholic

Last Name

First Name

Middle Name

Address

City/State

Zip Code

Date of Birth

Place of Birth

Last School Attended

Grade

SACRAMENTAL INFORMATION *(Catholic Applicants Only)*

Date of Baptism

Church

City/State

Date of First Communion

Church

City/State

Current Parish

City/State

PARENT/ INFORMATION

Parent 1

Last Name

First Name

E-mail Address

Occupation

Employer

Phone Number

Country of Origin

Marital Status:

Parent 2

Last Name

First Name

E-mail Address

Occupation

Employer

Phone Number

Country of Origin

Marital Status:

SCHOOL USE ONLY

Birth Certificate

Immunization Records

Standardized Test Scores

Baptismal Certificate

Report Card

Testing/Registration Fee

Date Submitted: _____