



# POWERS CATHOLIC HIGH SCHOOL

## Transfer Student Application

Please return this form and the \$100 application fee to:  
Powers Catholic High School  
Admissions Office  
1505 W. Court Street  
Flint, MI 48503

Student's Legal Name: \_\_\_\_\_  
Last First Middle

Prefers to be called: \_\_\_\_\_ Gender: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Student's Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Present Grade: \_\_\_\_\_ Applying to Grade: \_\_\_\_\_

Please circle the ethnic/racial group with which you are identified. This information will be used for Leadership and/or Scholarship programs that become available, as well as for census reports.

- (H)Hispanic (B)African-American, Black (O)Asian or Pacific Islander (I)Indian (not Native American)  
(N)Native American (W)White (M)Multi-Racial (R)Arabic

Religion: \_\_\_\_\_ Parish/Church: \_\_\_\_\_

Present School (Years Attended): \_\_\_\_\_

**Have you (the applicant) ever been placed on probation, suspended, or dismissed from another school for disciplinary and/or academic reason?**

- No  Yes (if yes, please attach full details, including name of school and year.)

**Father or Guardian 1:** \_\_\_\_\_  
Last Name

**Mother or Guardian 2:** \_\_\_\_\_  
Last Name

\_\_\_\_\_  
Title Legal First Name

\_\_\_\_\_  
Title Legal First Name

\_\_\_\_\_  
Home Address (if different from applicant)

\_\_\_\_\_  
Home Address (if different from applicant)

\_\_\_\_\_  
City: State Zip

\_\_\_\_\_  
City: State Zip

\_\_\_\_\_  
Home Telephone (if different from applicant)

\_\_\_\_\_  
Home Telephone (if different from applicant)

\_\_\_\_\_  
Cellular telephone

\_\_\_\_\_  
Cellular telephone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Religion Church

\_\_\_\_\_  
Religion Church

Parents are:  Married  Divorced  Separated  Mother Deceased  Father Deceased

**Who will be responsible for the payment of this student's tuition?**

\_\_\_\_\_  
Name 1

\_\_\_\_\_  
Name 2 (if applicable)

Will you be applying for tuition assistance through your parish?  Yes  No

Will you be applying for tuition assistance through Powers Catholic?  Yes  No

