



NOTRE DAME

A C A D E M Y

425 Salisbury Street / Worcester, MA 01609-1299
Telephone 508-757-6200 / Fax 508-757-1888

APPLICATION FOR ADMISSION

To complete the application process, the following are required:

- Entrance Exam Registration Form with a \$25.00 fee by October 30th
 - Application for Admission Form with a \$25.00 fee by December 1st
 - Present school transcript and standardized test results
 - Essay written by the applicant describing her interest in the Academy
 - Two teacher recommendations
- Make checks payable to Notre Dame Academy

Deadline for application materials: December 1st

STUDENT INFORMATION

Application to: Grade 9 Grade 10

Student's Name _____
LAST FIRST FULL MIDDLE NAME

Mailing Address _____
STREET NUMBER STREET P.O. BOX / APARTMENT NUMBER

CITY/TOWN STATE ZIP

Telephone (____) _____ - _____ Date of Birth _____ / _____ / _____

Present School _____ Present Grade _____

FAMILY INFORMATION

Father's (or Guardian's) Name

Mother's (or Guardian's) Name

FIRST MIDDLE INITIAL LAST

Address (if different from above) _____
STREET

CITY/TOWN STATE ZIP

FIRST MAIDEN LAST

Address (if different from above) _____
STREET

CITY/TOWN STATE ZIP

Telephone (____) _____

Telephone (____) _____

Father's Occupation _____

Mother's Occupation _____

Employer _____

Employer _____

Employer Address _____

Employer Address _____

Work Telephone (____) _____

Work Telephone (____) _____

Cell (____) _____

Cell (____) _____

E-mail Address _____

E-mail Address _____

College(s)/University(ies) Attended (optional):

College(s)/University(ies) Attended (optional):

OTHER INFORMATION

Student Resides With: Both Parents Mother Father Other

Church Affiliation _____

Relatives who have attended Notre Dame Academy:

Name _____ Relative _____ Graduation Year _____

Name _____ Relative _____ Graduation Year _____

Name _____ Relative _____ Graduation Year _____

Name _____ Relative _____ Graduation Year _____

How did you find out about Notre Dame Academy? _____

Why do you want to attend Notre Dame Academy? Please write a short composition stating your reasons.

Lined area for writing a short composition.

THE FOLLOWING INFORMATION SHOULD BE MAILED NO LATER THAN DECEMBER 1:

- This Application for Admission along with **\$25.00 registration fee** made payable to Notre Dame Academy
- Two Teacher Recommendation Forms
- Transcripts

Mail to: Admissions Office, Notre Dame Academy, 425 Salisbury Street, Worcester, MA 01609

DATE _____

PARENT SIGNATURE _____

| | |
|----------------------------|---------------|
| FOR OFFICE USE ONLY | |
| Date Received _____ | Check # _____ |