

**ST. AUGUSTINE INDIAN MISSION SCHOOL  
RELIGION INFORMATION FORM**

Date:

<b>Student Last Name</b>	<b>First</b>	<b>Middle</b>	<b>Date of Birth</b>
<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Zip</b>
<b>Tribal Enrollment # (If applicable)</b>		<b>Notes</b>	

	<b>Natural / Adoptive Father</b>	<b>Natural / Adoptive Mother</b>	<b>Guardian / Custodial Parent</b>	<b>Other Siblings / Birthdays</b>
<b>Name</b>				
<b>Religion</b>				
<b>Place of Birth</b>				
<b>Occupation</b>				
<b>Place of Employment</b>				
<b>Education</b>				
<b>Marital Status</b>				

	<b>Baptism</b>	<b>Penance</b>	<b>First Communion</b>	<b>Confirmation</b>
<b>Date</b>				
<b>Church</b>				
<b>City / State</b>				

<b>Schools attended and location</b>	<b>School and date transferred from</b>