



191 Rutherford Pl.
North Arlington, NJ 07031
201-998-8227 x'434
admissions@qphs.org
www.qphs.org

Application For Admission - Ninth Grade

This application is to be used in conjunction with the Cooperative Admissions Examination. A student applying to QPHS must take the Archdiocesan COOP Exam. Also, the **Ninth Grade Applicant Record** must be given to the student's elementary/middle school, to be forwarded to QPHS. If you have not registered for/taken the COOP Exam, please contact the Admissions Office. **Please check the appropriate category in section A and check B if it applies.**

- A. _____ Student has registered for/taken CO-OP Admissions Exam and QPHS is student's _____ choice.
or _____ (1st/2nd/3rd)
_____ Student has not taken CO-OP Exam and will contact QPHS Admissions Office.
- B. _____ Ninth Grade Applicant Record has been given to student's current elementary or middle school.

Please neatly print or type all information.

Name of Applicant _____
Last First Middle Initial

Home Address _____

City _____ State _____ ZIP _____

Home Phone _____ Other Phone _____

Email Address _____ Date of Birth _____ Gender: M ___ F ___
MM/DD/YYYY

Name of Present School _____

School Address _____

City _____ State _____ ZIP _____

School Phone _____ Parish _____

With whom does the applicant live? Both Parents Mother Father Other _____

Mother's Name _____
First Middle Initial Last

Mother's Work # _____ Mother's Email Address _____

Father's Name _____
First Middle Initial Last

Father's Work # _____ Father's Email Address _____

Guardian's Name _____
First Middle Initial Last

Guardian's Work # _____ Guardian's Email Address _____

Please list any relatives who have attended or are attending Queen of Peace High School. **(Optional)**

Name

Year of Graduation

Relationship

Do you have an association with a member of the Queen of Peace community? Examples: current teacher, student, parishioner, coach, etc. **(Optional)**

Name of Person _____

Person's Relationship to QP _____

In the space below, you may take the opportunity to inform us of activities you enjoy, situations in which you have shown leadership, or any other information you would like us to know about you. (Please limit your information to the space provided.)

I am currently involved in:

Clubs: _____

Organizations: _____

Sports: _____

Parent or Guardian Signature _____ **Date** _____

**Please return this form to:
Admissions Director, Queen of Peace H.S., 191 Rutherford Pl., North Arlington, NJ 07031**