



# ursuline

A c a d e m y o f C i n c i n n a t i

5535 Pfeiffer Road Cincinnati, Ohio 45242  
(513) 791-5791

## Student Application & Test Registration

**This application is for students entering ninth grade at Ursuline Academy ONLY. All applicants for admission to Ursuline Academy must submit this application along with the Record Release Form. Students who are testing at Ursuline must also submit the \$25 test fee.**

**Students: Please print and complete this in your own handwriting.**

Date of application \_\_\_\_\_, 2007

Applicant's legal name \_\_\_\_\_  
(last) (first) (middle)

Address \_\_\_\_\_ Phone number \_\_\_\_\_  
(street)

\_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
(city, state & zip)

Neighborhood (ex. Symmes Township) \_\_\_\_\_

Name of parent(s) with whom student lives:

Mr. Dr. \_\_\_\_\_ Mrs. Ms. Dr. \_\_\_\_\_  
(Father's name) (Mother's name) (last name)

Parent E-mail Address: \_\_\_\_\_

School now attending \_\_\_\_\_

Religion \_\_\_\_\_

Ethnic Origin (for scholarship use only)

African-American     Asian/Pacific Islander     Hispanic  
 American Indian     Caucasian     Other \_\_\_\_\_

Is your mother an Ursuline Academy of Cincinnati alumna? \_\_\_\_\_ grandmother? \_\_\_\_\_

If yes, give name \_\_\_\_\_ and year of graduation \_\_\_\_\_

Do you have any sisters who previously attended or currently attend Ursuline? \_\_\_\_\_

If yes, give names and years of graduation.

\_\_\_\_\_  
\_\_\_\_\_

