



# John Paul II Catholic High School

www.jpichs.org

## Placement Test 2012-2013 Registration Form

Student Name: \_\_\_\_\_

School Attending 2011-2012 \_\_\_\_\_ Grade \_\_\_\_\_

### Parent/Guardian Contact Information

Home  
Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_  
(please print)

Placement Test fee \$25.00 check payable to John Paul II CHS.

Parent or Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_