

ST. CHARLES BORROMEIO SEMINARY
INFORMATION SHEET FOR
TUITION PURPOSES

DATE _____

NAME _____
First Middle Last

SOCIAL SECURITY # _____

PERSONAL E-MAIL _____

DIOCESE _____

CLASS YEAR

_____ I College _____ Pre-Theology I _____ I Theology

_____ II College _____ Pre-Theology II _____ II Theology

_____ III College _____ III Theology

_____ IV College _____ IV Theology

DIOCESE/PERSON WHO IS TO RECEIVE INVOICE

NAME _____

TITLE _____
(Vocation Director, Parent, etc.)

STREET _____

CITY _____

STATE _____

ZIP CODE _____

TELEPHONE NUMBER/AREA CODE _____