

**GUIDANCE DEPARTMENT QUESTIONNAIRE**  
**(Must be completed by all students)**

**Please Provide a Small  
Picture Here**  
  
**(New Students  
Mandatory)**

The information here is confidential. The purpose of this questionnaire is to help us know you better so that we can better assist you.

**I. PERSONAL**

Name: \_\_\_\_\_  
(Last) (First) (Middle) (Nickname)

Grade Level: 8 9 10 11 12 Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Home Address City State Zip Code

City of Birth Your Religion Phone # Cell #

Student's email address: \_\_\_\_\_

The last school I attended (before Jesuit) was: \_\_\_\_\_

**II. FAMILY**

I am presently living with (check one): Father and Mother \_\_\_\_\_ Father Only \_\_\_\_\_ Mother Only \_\_\_\_\_

Mother & Stepfather \_\_\_\_\_ Father & Stepmother \_\_\_\_\_ Other (Please Specify) \_\_\_\_\_

Check if appropriate: Father Deceased \_\_\_\_\_ Date \_\_\_\_\_ Mother Deceased \_\_\_\_\_ Date \_\_\_\_\_

Parents Separated \_\_\_\_\_ Date \_\_\_\_\_ Parents Divorced \_\_\_\_\_ Date \_\_\_\_\_

**THE FOLLOWING INFORMATION DEALS WITH THOSE WHITH WHOM YOU ARE PRESENTLY LIVING:**

Father (Stepfather or Guardian): Full Name \_\_\_\_\_

Occupation \_\_\_\_\_ Place of Work \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Jesuit Graduate Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what year? \_\_\_\_\_ His religion \_\_\_\_\_

Mother (Stepmother or Guardian): Full Name \_\_\_\_\_

Occupation \_\_\_\_\_ Place of Work \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Her religion \_\_\_\_\_

Number of: Older Brothers \_\_\_\_\_ Older Sisters \_\_\_\_\_ Younger Brothers \_\_\_\_\_ Younger Sisters \_\_\_\_\_

How many of these are still living in your home? Brothers \_\_\_\_\_ Sisters \_\_\_\_\_

If you have brothers(s) currently attending Jesuit, please list the name(s) here: \_\_\_\_\_

If you have a brother(s) who graduated from Jesuit, please list the name(s) and year(s) of graduation here:

NAME: \_\_\_\_\_

III. **HEALTH**

Do you have any permanent medical condition? Yes \_\_\_\_ No \_\_\_\_ Any recent surgeries? Yes \_\_\_\_ No \_\_\_\_

If yes, please specify: \_\_\_\_\_ Glasses \_\_\_\_ Contacts \_\_\_\_

In the past year, have you had any illness or accident that kept you out of school for one month or more? Yes \_\_\_\_ No \_\_\_\_

Please explain \_\_\_\_\_

Academic Evaluation: Date of last evaluation \_\_\_\_\_ Currently or in past seen outside counselor/therapist/social worker/psychologist/psychiatrist? Yes \_\_\_\_ No \_\_\_\_ Name \_\_\_\_\_

Reason \_\_\_\_\_

Are you currently taking any medications? \_\_\_\_\_

IV. **OTHER**

What was your overall grade average last year? A 90-100 \_\_\_\_ B 82-9 \_\_\_\_ C 75-81 \_\_\_\_ D 70-74 \_\_\_\_

Do you have a job during the school year? Yes \_\_\_\_ No \_\_\_\_ If yes, what kind of work is it? \_\_\_\_\_

Hours per week \_\_\_\_\_ Do you have a job in the summer only? Yes \_\_\_\_ No \_\_\_\_ If yes, what kind of work is it? \_\_\_\_\_

**WHICH, IF ANY, WOULD YOU LIKE TO DISCUSS WITH A COUNSELOR?**

Education or Academic Concerns \_\_\_\_ Career \_\_\_\_ Personal or Family Difficulty \_\_\_\_

Other (Please specify briefly) \_\_\_\_\_

**NEW STUDENTS:** Circle any extracurricular clubs or sports that you would like more information about.

**RETURNING STUDENTS:** Circle any extracurricular clubs or sports that you have participated in while a student at Jesuit.

- ACADEMIC GAMES
- ACOUSTIC GUITAR CLUB
- ART CLUB
- ASIAN CLUB
- ATHLETIC TRAINERS
- BASEBALL TEAMS
- BASKETBALL TEAMS
- BEACH VOLLEYBALL CLUB
- BLUEJAY ANNUAL- (YEARBOOK)
- BLUE JAY BANDS
- BLUE JAY NEWSPAPER
- BOARD GAMES CLUB
- BOWLING TEAM
- CALLIOPE LITERARY MAGAZINE
- CHEERLEADERS
- CHESS CLUB/TEAM
- CHORUS
- CLASSIC ROCK CLUB
- CLASSICS SOCIETY
- CROSS COUNTRY TEAM
- CYCLING CLUB
- DEBATE TEAM
- EXPERIMENTAL LITERATURE CLUB
- FENCING CLUB
- FOOSBALL CLUB

- FOOTBALL TEAM
- FRENCH CLUB
- FRISBEE GOLF CLUB
- GERMAN CLUB
- GOLF CLUB/TEAM
- GREEN CLUB
- HERPETOLOGY CLUB
- INTRAMURAL SPORTS
- INVESTMENT CLUB
- J-TROUPE IMPROV GROUP
- JESUIT COMMUNITY ACTION PROJECT
- MAGIC CLUB
- MCJROTC BAND
- MCJROTC COLOR GUARD
- MCJROTC DRILL TEAM
- MCJROTC PHYSICAL FITNESS
- MCJROTC RIFLE TEAM
- MEDIA CLUB
- MOCK TRIAL TEAM
- MOVIE CRITICS CLUB
- MU ALPHA THETA
- NATIONAL HONOR SOCIETY
- OUTDOORS CLUB
- PAINTBALL CLUB
- PEER SUPPORT

- PHILELECTIC SOCIETY
- PING PONG CLUB
- PRE-PRANDIALS
- PREP QUIZ BOWL TEAM
- PRO-LIFE CLUB
- ROBOTICS CLUB
- RUGBY CLUB
- SAILING CLUB
- SOCCER TEAM
- SPANISH CLUB
- SODALITY
- SPORTSMEN'S CLUB
- ST. PETER CLAVER CLUB
- STUDENT COUNCIL
- STUDENT MINISTRY
- SWIMMING TEAM
- TENNIS CLUB/TEAM
- TRACK TEAM
- ULTIMATE FRISBEE CLUB
- UNDERGROUND MUSIC CLUB
- URBAN FARMING CLUB
- WRESTLING TEAM
- WJHS RADIO & TV