

 St. John Lutheran School

 APPLICATION FOR ADMISSION

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| **Student Information** |
| Student’s Name | 🞏Male 🞏Female |
| Date of Birth | Place of Birth |
| Present School | Grades Completed |
| Applying for School Year | Applying for Grade Level |
| **Parent Information** |
| Father’s Name | Mother’s Name | Telephone |
| Address | City, State, Zip |
| Father’s Occupation | Employed by | Work Phone:Cell: |
| Mother’s Occupation | Employed by | Work Phone: Cell: |
| If Parents are divorced or separated, to whom should admissions correspondence be sent to? 🞏 Father 🞏 Mother 🞏 Both | With whom does the child reside?🞏 Father 🞏 Mother |
| If you wish correspondence to be sent to another address, please indicate here: 🞏 Yes | Address, City, State, Zip |
| **Church Information** |
| Name of Church currently attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Are you active member of your church? 🞏 Yes 🞏 No | Is your child Baptized? 🞏 Yes 🞏 NoDate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Does your child regularly attend church? 🞏 Yes 🞏 NoDoes your child regularly attend Sunday School? 🞏 Yes 🞏 No |
| **Academic Information (if child is in K-8)** |
| Has your child ever had problems in school with regards to (check all that apply): Social Adjustment 🞏Comments: Discipline 🞏Academic Subject 🞏 |
| Do you agree to supervise your child’s homework and see that assignments are completed on a regular basis? 🞏 Yes 🞏 No |
| Has your child been in difficulty with civil or juvenile authorities? 🞏 Yes 🞏 No If yes, please explain: |
| Has your child ever been promoted more than one grade in a year? 🞏 Yes 🞏 No | Has your child ever been retained in a grade? 🞏 Yes 🞏 No |
| What areas of education are your greatest concerns for your child:  (Continued on back of page) |
| **Reasons for enrollment** |
|  Why do you wish to enroll your child in St. John Lutheran School? |
| **Preschool Enrollment Information: Program selection**  |
| Please check which preschool or kindergarten session you with to enroll your child: 🞏 3 year-old program 🞏 4 year-old program 🞏 Half-Day option 🞏 Full-Day option Tuesdays/ Thursdays Mon./Wed/Fri 8:00-11:00 8:00- 2:50 **Tuition:**3 year-old Half-Day $700 \_\_\_\_\_ 4 year-old Half-Day $700 \_\_\_\_\_ 3 year-old Full-Day $1,250 \_\_\_\_\_ 4 year-old Full-Day $1,250 \_\_\_\_\_  |
| **Parent Signatures** |
| Father’s signature | Date |
| Mother’s signature | Date  |
| Email Addresses: 1.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **School Staff Information (Office use only)**  |
| Principal’s comments: |
| For office use: Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Visited School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Files Requested \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Records \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Info Class Completed\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Category 1 2 3 4 |

***Mission Statement***

***St. John Lutheran School exists to assist parents in bringing children to Christ and nurturing children in Christ that they might live for Christ now on earth and with Christ forever in heaven.***