



St. Paul's Lutheran School
APPLICATION FOR ADMISSION

STUDENT INFORMATION

Student's Name: _____ M ___ F ___

Date of Birth: _____ Place of Birth: _____

Present School: _____ Grades Completed _____

PARENT INFORMATION

Father's Name: _____

Address: _____

Phone: _____ Father's Occupation: _____

Mother's Name: _____

Address: _____

Phone: _____ Mother's Occupation: _____

If parents are divorced or separated, with whom does the child reside? _____

CHURCH INFORMATION

Name of church currently attending: _____

Are you active members of your church? Yes ___ No ___

If you are not active or do not have church, are you looking for a church? Yes ___ No ___

ACADEMIC INFORMATION

Has your child ever had problems in school with regard to (check all that apply):
Social adjustment _____ Discipline _____ A particular academic subject _____ (please list subject)

Do you agree to supervise your child's homework and see to it 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

GENERAL INFORMATION

Do you agree to be supportive of the school, its teachers, and policies? Yes ___ No ___

Do you agree to be prompt in making tuition and other school-related payments? Yes ___ No ___

Do you agree to complete, within one year of enrollment, a series of Bible Information Classes? Yes ___ No ___

Have you read and do you understand the student handbook and its policies? Yes ___ No ___

REASONS FOR ENROLLING

Why do you wish to enroll your child in St. Paul's Lutheran School?

PARENT SIGNATURE

Father's signature

Date

Mother's Signature

Date

COMMENTS—FOR OFFICE USE

Principal's comments on parent interview

Date received _____

files requested _____

Visit made _____

registration paid _____