



Emmanuel Lutheran School Application for Admission

STUDENT INFORMATION

STUDENT'S NAME		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Date of Birth	Applying for School year	Grades Completed	Applying for Grade Level

PARENT INFORMATION

Father's Name		Mother's Name		Residence Telephone	
Residence Address			City, State, Zip		
Father's cell	Father's email		Mother's cell	Mother's email	
Father's Occupation		Employer		Work Phone	
Mother's Occupation		Employer		Work Phone	
If parents are divorced or separated, to <u>whom should admissions correspondence be sent?</u>			With whom does the child reside?		
If you wish correspondence to be sent to an address other than the above, please indicate here:		Street Address		City, State, Zip	

Email address

CHURCH INFORMATION

Name of church currently attending _____	Is your child baptized? Yes ___ No ___
Are you active members of your church? Yes ___ No ___	Does your child regularly attend church? Yes ___ No ___
	Does your child regularly attend Sunday School? Yes ___ No ___

REASONS FOR ENROLLING

Why do you wish to enroll your child in Emmanuel Lutheran School?

GENERAL INFORMATION

Have the following school policies, as outlined in the Handbook, been explained to you? Please initial.

Attendance and absence policies _____
Bullying policy _____
Church singing expectations _____
School Parents Bible Information Class _____
Tuition schedule and payment policy _____
Discipline policy _____

Have you read the Handbook? Yes ___ No ___

Do you agree to comply with all policies as defined by the school handbook? Yes ___ No ___

PARENT SIGNATURES

Father's signature	Date
Mother's signature	Date

CHURCH & SCHOOL STAFF COMMENTS

Principal's comments on parent interview:

Church staff member's comments on parent interview, if applicable:

For office use: date received _____ files requested _____
 visit made _____ health records _____
 registration paid _____