

APPLICATION FOR SCHOOL ENTRANCE

2008-2009

Applying for grades: Preschool 3's am 1/2 day Tues/Thurs _____ M-F _____
Preschool 3's full day* Tues/Thurs _____ M-F _____
Preschool 4's am 1/2 day M/W/F _____ M-F _____
Preschool 4's pm 1/2 day M/W/F _____
Preschool 4's full day* M/W/F _____ M-F _____
Jr. Kindergarten(1/2 day)... _____ (full day) _____
Kindergarten(1/2 day)... _____ (full day) _____
Grade: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

*Full Day Preschool is 1/2 day preschool and 1/2 day Mid Day Care

Please attach to this application:

- A copy of your child's birth certificate
- Signed enrollment contract
- Any applicable fees (registration/activity/evaluation)

PLEASE PRINT

Child's Last Name _____ Child's First Name _____

Child's Nickname _____ Male ___ Female ___ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Home Telephone _____ 2nd Contact Phone Number _____

Home Email _____

Father's Name _____ Mother's Name _____

or or

Legal Guardian #1 _____ Legal Guardian #2 _____

Child living with: Both Parents ___ Mother only ___ Father only ___ Other ___

Other Children in family: Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Name of last school attended _____ Grade _____

Neighborhood Public School _____ District _____

How did you hear about St. Timothy's Lutheran School? _____

Referred by _____

Special remarks: Why do you want your child to attend St. Timothy's Lutheran School?

*We, as parents, understand that quality education requires the joint effort of home and school. As a result, we will be supportive of the programs and policies of the school in order to strengthen our child's Christian education.

*An Authorized representative or licensing analyst from the Department of Social Services/Community Care Licensing may, upon presentation of proper identification, enter and inspect the preschool at any time with or without prior notice. The DSS/CCL has the authority to interview children and staff without prior consent.

Parent/Guardian Signature

Date

ST TIMOTHY'S LUTHERAN SCHOOL PHOTO/VIDEO RELEASE

I hereby give permission for my child to be photographed and/or video taped at St. Timothy's Lutheran School or on a school trip. I understand that these pictures could be used in school projects, yearbook, news releases, brochures, and/or possible advertising.

Parent Initial

Date

Cut and paste school survey here