



# Trinity Lutheran School

## APPLICATION FOR ADMISSION

### STUDENT INFORMATION

Student's Name		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Date of Birth	Place of Birth		
Present School	Grades Completed		
Applying for School Year	Applying for Grade Level		

### PARENT INFORMATION

FATHER'S Name		Father's Residence Telephone	Father's CELL Phone
Father's EMAIL Address			
Father's Residence Address		City, State, Zip	
Father's Occupation	Employed by	Business Telephone	Ext.
Business Address		City, State, Zip	
MOTHER'S Name		Mother's Residence Telephone	Mother's CELL Phone
Mother's EMAIL Address			
Mother's Residence Address		City, State, Zip	
Mother's Occupation	Employed by	Business Telephone	Ext.
Business Address		City, State, Zip	
If parents are divorced or separated, to whom should admissions correspondence be sent?		With whom does the child reside?	

### CHURCH INFORMATION

Are you active members of your church? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is your child baptized? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of church currently attending _____	Does your child regularly attend church? Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	Does your child regularly attend Sunday School? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you interested in attending classes which explain the teachings of Trinity Lutheran Church? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you wish to become a member of Trinity Lutheran Church? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Would you regularly attend worship services at Trinity? Yes <input type="checkbox"/> No <input type="checkbox"/>	



## ACADEMIC INFORMATION

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 ever been promoted more than one grade in a year?

Yes  No

Has your child ever been retained in a grade?

Yes  No

Has your child ever had problems in school with regard to (check all that apply):

Social adjustment  Discipline  A particular academic subject?

COMMENTS:

Has your child been in difficulty with civil or juvenile authorities? Yes  No  If yes, please explain:

## REASONS FOR ENROLLING

Why do you wish to enroll your child at Trinity Lutheran School?

## PARENT SIGNATURES

Father's signature

Date

Mother's signature

Date

*for office use only:*

## CHURCH & SCHOOL STAFF COMMENTS

Principal's comments on parent interview:

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

Date received

\_\_\_\_\_

Files requested

\_\_\_\_\_

Visit made

\_\_\_\_\_

Health records

\_\_\_\_\_

Registration paid

\_\_\_\_\_