

St. Peter's Lutheran School
APPLICATION FOR ENROLLMENT 2009-2010

8701 Elk Grove-Florin Road
Elk Grove, CA 95624
(916) 689-3050

Student Information:

Date of application: _____ Grade: _____ Male: _____ Female: _____

Name: _____
last name first name initial legal last name (if different)

Home address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Date of birth: _____

Place of birth: _____ Baptismal date: _____

Home church: _____ Do you attend regularly? _____

Parent/Guardian Information:

Mother: _____ Occupation: _____ Employer's name: _____

Home mailing address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell/beeper number: _____

Father: _____ Occupation: _____ Employer's name: _____

Home mailing address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell/beeper number: _____

Step parent/guardian: _____ Occupation: _____ Employer's name: _____

Home mailing address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____ Cell/beeper number: _____

Custody of student: _____

The legal custody document and specific conditions of custody must be submitted to the office in writing before admittance.

Other Information:

School last attended: _____

Mailing address: _____ City: _____ State: _____ Zip: _____

Please briefly state your reason for desiring enrollment for your child at St. Peter's Lutheran School: _____

Has your child had any special learning problems or disabilities, which might affect his/her progress in school?

Yes _____ No _____

If yes, please describe: _____

Does your child have any physical handicaps, speech difficulties, chronic illnesses, allergies, or unusual diseases?

Yes _____ No _____

If yes, please describe: _____

Names and dates of birth of siblings: _____



This application is valid only when all parts are completed and signed below to indicate acceptance of the conditions stated below. St. Peter's Lutheran School admits students of any race, color, gender, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at this school. The school does not discriminate on the basis of race, color, gender, national or ethnic origin in administration of its educational policies, admission policies, or other school administered programs.

Completion of this application does not guarantee enrollment. All applicants will be evaluated on the basis of previous academic performance, academic ability, student conduct, and personal and family commitment to Christ. Upon notification of acceptance, your child's place is reserved.

When an application is submitted, a new student evaluation fee of \$50 (non-refundable) and the \$175 registration fee must be paid. *Note: The registration fee will be \$200 after March 31, 2009.* If the child is not accepted as a student, the registration fee will be returned in full. Tuition fees are payable at this time or in equal monthly payments.

As parent or guardian of the above named child, I agree to:

1. Satisfy the necessary requirements of making application, including a placement evaluation and an evaluation from the child's present teacher or counselor.
2. Support the objectives of St. Peter's Lutheran School while cooperating with the teachers and administration in assisting the child in faithful and diligent work and in the exercise of Christian discipline and training.
3. Pay tuition charges, applicable extended day care charges, and required fees as per the schedule established by the school.
4. Provide the necessary health and immunization records and other school data as requested.

Signature of parent/guardian is required.

Parent/Guardian

Date

ALL NEW students must present a birth certificate or baptismal certificate for verification of age.

1. All students must be potty trained.
2. Students must be 3 years by December 2nd to enroll in the 3 year-old program.
3. Students must be 4 years by December 2nd to enroll in the 4 year-old program.
4. Students must be 5 years by December 2nd to enroll in the Kindergarten program
5. Students must be 6 years by December 2nd to enroll in the 1st grade program
6. Students must be 7 years by December 2nd to enroll in the 2nd grade program
7. Students must be 8 years by December 2nd to enroll in the 3rd grade program
8. Students must be 9 years by December 2nd to enroll in the 4th grade program
9. Students must be 10 years by December 2nd to enroll in the 5th grade program
10. Students must be 11 years by December 2nd to enroll in the 6th grade program
11. Students must be 12 years by December 2nd to enroll in the 7th grade program
12. Students must be 13 years by December 2nd to enroll in the 8th grade program

St. Peter's Lutheran School
PARENTAL SUPPORT AGREEMENT 2009-2010
8701 Elk Grove-Florin Road
Elk Grove, CA 95624
(916) 689-3050

Student's Last Name *First Name* *MI* *Date of Birth*

1. I agree to support the school in enforcing its policies and rules, in the Spirit of Christ (Hebrews 13:17).
2. I agree to support the following statements of faith:
 - The Bible as the inspired and inerrant Word of God
(2 Peter 1:21; 2 Timothy 3:16)
 - The Bible as the authoritative norm for faith and life
(Psalm 119:105; 2 Timothy 3:16-17; John 8:31-32)
 - Baptism as the means of entry into the Christian faith
(Acts 2:37-39; Mark 16:16; Matthew 28:19)
 - Belief and faith in Jesus Christ, the Son of God, as the only means of salvation
(John 3:16; John 14:6; Acts 4:12)
 - The Triune God of the Father, Son, and Holy Spirit
(Matthew 28:19; John 10:30; Luke 3:21-22)
3. I agree to support the teachings of the school, and I am satisfied with both the curriculum and the disciplinary policy.
4. I pledge my cooperation in:
 - Faithful prayer
 - Parental involvement
 - Providing current emergency information
 - Regular and prompt tuition payments

Your signature on this form means that you support the teachings of St. Peter's Lutheran School. Please do not cross out or make changes on this form. Signatures of both parents/guardians are required if both have legal and financial responsibility for the child.

Parent/Guardian

Date

Parent/Guardian

Date