

“Learning and living as God’s baptized children”

****FOR OFFICE USE ONLY****

Date Received _____ Date met with principal: _____
Registration Fee Paid _____

APPLICATION FOR ENROLLMENT

SCHOOL YEAR _____ **FOR GRADE** _____

PLEASE FILL OUT COMPLETELY:

Student's Full Name: _____ Male ___ Female ___ Adopted ___ yes ___ no

Address _____

City _____ Zip _____

Home Telephone _____

Date of Birth _____ **(Please include a copy of child’s Birth Certificate)**

Place of Birth _____ Ethnic Group: _____

Date of Baptism _____

Church Where Baptized _____

Child's Church Membership _____

Parent's Name(s): _____ email address: _____

Emergency telephone when parents cannot be reached: _____

Name of Person _____

Relationship _____

Father's Occupation _____
Place of Employment _____
Work Number _____
Father's Church Membership _____

Mother's Occupation _____
Place of Employment _____
Work Number _____
Mother's Church Membership _____

How long does your child intend to remain at St. John's Lutheran School?

THE FOLLOWING STATEMENT IS VERY IMPORTANT!
Why do you desire to have your child attend St. John's Lutheran School?

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

List any learning problems: _____

List two persons, not relatives, who know your child well:

Name	Address	Phone #
_____	_____	_____
_____	_____	_____

BROTHERS AND SISTERS: _____ **DATE OF BIRTH:** _____

Family Doctor's Name _____
Clinic _____ Telephone _____

Medical problems or allergies:

Resident of Public School District _____

Last School Attended _____

Transportation: (check)
____ Osseo School Bus (Osseo School Residents Only)
____ St. John's School (\$95 per month & \$65 for part time)
____ Provide own transportation

BUS DISTRICT THAT YOU LIVE IN _____

ANSWERING THE FOLLOWING YES OR NO:
Do you desire any information about St. John's Lutheran Church _____
Do you desire to become a member of St. John's _____

THE COMPLETION OF THIS APPLICATION FORM, \$130 REGISTRATION FEE, AND THE SIGNATURE OF THE PARENT OR GUARDIAN CONSTITUTES AN AGREEMENT THAT ANY TUITION OR FEES PERTAINING TO THIS STUDENT'S ENROLLMENT AT ST. JOHN'S LUTHERAN SCHOOL WILL BE PAID BY THE PARENT/GUARDIAN SIGNING.

Signature of parent/guardian _____ Date _____

*The \$130 Registration fee, which is not refundable, must accompany this application. (\$175 registration fee if registered after May 1)