

APPLICATION FOR ADMISSION

STUDENT I		Date						
Student's Name (first, mi	iddle, last)					Male Female		
Date of Birth	Place of Birth		Age	Ethn	nicity	Telephone		
Address	Address					With whom does the child reside?		
Present School	Address/City/S	State			Current Grade Level			
Applying for School Year	,					Applying for Grade Level		
PARENT/GI	JARDIAN	INFO	RMATIC	DN				
Father/Guardian's Name	lephone			Email Addres	ess			
Residence Address				City, State, Zi	ip			
Occupation		Employed b	by			Business Telephone Ext		
Mother/Guardian's Name	Te.	lephone			Email Addres	ess		
Residence Address				City, State, Zi	ip			
Occupation		Employed b	by			Business Telephone Ext.		
If parents are divorced or correspondence be with?	separated, to whom	be sent to an address other than the above, please indicate						
Name		Street	t Address	below:		City, State, Zip		
CHURCH IN	JEORMA-	ION						
Name of church currently attending Are you members of this church? Do you regularly attend church? Yes No No				N/A	Is your child baptized? Does your child regularly attend church? Does your child regularly attend Sunday School? Yes No Yes No			
Do you wish to become a Would you regularly atten Are you interested in atter	nd worship services a nding classes which e	nt Christ Luthera explain the teach	an Church? hings of Christ L	utheran Church		Yes No Maybe Yes No Maybe Yes No Maybe		
ACADEMIC	INFORM	ATION						
Has your child ever had pr Please explain: Has an Individual Educati					ial Adjustment	Discipline Academics Other Yes No		
Do you agree to supervise Do you agree to comply w	•		C	nts are completed Yes	d on a regular basis	is? Yes No		
Is a language outside of E	nglish spoken in you	r home? \(\sum_{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\exititt{\text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\te}\text{\texi}\text{\text{\text{\texi}\text{\text{\texi}\text{\texi}\text{\text{\texitit{\text{\texi}\text{\texit{\texit{\texi}\tint{\tiint{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi}\texit{\texi{\ti	Yes No					
Has your child been in dif If yes, please explain:	ficulty with civil or j	uvenile authori	ties? Yes	es No				
Has your child ever been p	promoted more than	one grade in a y	year? Yes	es No	Has your child e	ever been retained in a grade? Yes No		
Christ L	utheran Scho	pol • 20	1 North 3 ^r	d St. • F	agle Ríver,	-, W 54521 • (715)479-8284		

Previous School Attended	Address of School			nded	Reason for Leaving					
SIBLING INFOR	MATION									
Name	Birthday	y Age		School						
Name	Birthday	Age	Grade	Schoo	School					
Name	Birthday	Age	Grade	Schoo	School					
Name	Birthday	Age	Grade	Schoo	School					
REASONS FOR E	ENROLLING									
Why do you wish to enroll your child in Christ Lutheran School?										
Are there any special medical/health r	needs the staff should be aware of wi	ith your child?								
Are there any special medical/health needs the staff should be aware of with your child?										
Any known allergies?										
Any other information that you would like us to know?										
PARENT SIGNATURES										
I hereby declare that, to the best of my knowledge and belief, the information given in this application is true and complete, and I have not withheld any medical, academic,										
					is my obligation to inform the principal					
-	· ·	_	-	_	ut also grounds for dismissal from school).					
In addition, upon enrollment I agree to pay all school bills in a timely manner and understand that Christ Lutheran School may withhold my child's transcripts and academic records until payment is made in full.										
Father/Guardian's Signature				Date						
Signature				· · 						
Mother/Guardian's Signature				Date						

Revised: 2/17/25