



St. Peter Lutheran School Application For Admission

STUDENT INFORMATION

Student Name		Male <input type="checkbox"/> Female <input type="checkbox"/>	
Date of Birth	Current Age	Place of Birth	
Current School (or school last attended)		Grades completed	
Applying for School year		Applying for Grade Level 3K 4K K 1 2 3 4 5 6 7 8	
Is Your Child Baptized Yes <input type="checkbox"/> No <input type="checkbox"/>		Does Your Child Regularly attend Church Yes <input type="checkbox"/> No <input type="checkbox"/>	

ACEDMIC INFORMATION

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 Physical disability

Comments:

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

Parent Information
Father

First Name	Last Name(if different)	Occupation	Home/Work Phone	Primary Language	Resides with Student? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Church currently attending _____				Is Father an active member Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does Father wish to become a member of St. Peters? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Would father regularly attend worship services at St. Peters? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Fathers Email:					
Fathers Address:					

Mother

First Name	Last Name(if different)	Occupation	Home/Work Phone	Primary Language	Resides with Student? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Church currently attending _____				Is Mother an active member Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does Mother wish to become a member of St. Peters? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Would mother regularly attend worship services at St. Peters? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Mothers Email:					
Mothers Address:					

CORRESPONDENCE INFORMATION

If parents are divorced or separated, to whom should admissions correspondence be sent?	With whom does the child reside?
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If you wish correspondence to be sent to an address other than the above, please indicate here:

Name	Mailing address	City, State, Zip
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REASONS FOR ENROLLING

Why do you wish to enroll your child in St. Peter’s Lutheran School?

GENERAL INFORMATION

Have you read the *Handbook*? Yes No

Have the following school policies, as outlined in the *Handbook*, been explained to you? Please initial

Attendance and absence policies _____

Church singing requirements _____

School Parents Bible Information Class _____

Tuition schedule and payment policy _____

Discipline policy _____

Do you agree to comply with all policies as defined by the school handbook? Yes No

The following three questions are to be answered by all families applying for St. Peter Lutheran School:

Do you agree to have your child participate with his/her class when scheduled to sing in church?	Yes	No
Do you agree to be supportive of the school, its teachers and its policies?	Yes	No
Do you agree to be prompt in making tuition and other school-related payments?	Yes	No

The next question is to be answered by new families who are not members of St. Peter Lutheran Church or a sister congregation (other WELS):

Do you agree to complete, within one year of enrollment, the Bible Information Class?	Yes	No
If yes, check which session of classes you’d attend	<input type="checkbox"/> Sept-Oct	<input type="checkbox"/> Jan-Feb

The previous questions are explained in greater detail in your information packet. These materials provide the rationale for these requirements for enrollment. If you have any questions about any items on the application, please contact our principal, Jeff Miller at 920-867-2200 or email him at j.miller@splwega.net.

To applicant families who are not members of St. Peter Lutheran Church or sister congregations: After receiving your completed application, Mr. Miller will contact you to arrange a visit to your home to explain more thoroughly information about our program so that you can determine if we might meet your family’s needs. Again, please contact Mr. Miller with any questions.

Father’s Signature	Mother’s Signature	Date

CHURCH & SCHOOL STAFF COMMENTS

Principal’s comments on parent interview:

For office use: Date received _____ Files requested _____ Registration Paid _____
 Visit made _____ Health records _____ Category 1 2 3 4