

# Grace Lutheran Schools New Student Application



20\_\_ - 20\_\_

EARLY CHILDHOOD - ELEMENTARY -  
MIDDLE SCHOOL - HIGH SCHOOL - SUMMERCARE

Please choose program below (Early Childhood class or grade):  
**Early Childhood Grade Level:**

- Full Time    ECC2    ECC3    ECC4
- Part-Time Preschool  
PK3 (T/Th)    AM  
PK4 (M/W/F)    AM
- Kindergarten Only  
 Kindergarten w/Extended Care

**Grade entering (1 thru 12)** \_\_\_\_\_  
**Extended Care 1<sup>st</sup> thru 5<sup>th</sup> - please check**    Full-Time    Part-Time  
**Summercure (ECC2 thru 5th)** \_\_\_\_\_

## Student Information

Last name:		First name:		MI:	
Birthdate:		Age:	Gender:	Race or ethnicity:	
Home address:				Primary phone:	
City, State, Zip:				Primary e-mail: <small>To be used to communicate important school information</small>	
Daycare name & phone if not applying for GLS Extended Care:					
Please list the names and ages of any other children in the family:					
Name _____		Age _____		Name _____ Age _____	
Name _____		Age _____		Name _____ Age _____	

## Family Information

When more than one child from the same family is applying, you may complete this information on one child's form only.

Marital status of child's parents: \_\_\_\_\_   Student lives with: (please check only one)

Both parents in the home    Father only  
 Part-time with each parent    Mother only  
 Guardian \_\_\_\_\_  
*Describe nature of guardianship (grandparent, foster parent, etc.)*

### Father's Information

### Mother's Information

Father/guardian name:	Mother/guardian name:
Employer:	Employer:
Job Title:	Job Title:
Personal home address & phone if different from child(ren):	Personal home address & phone if different from child(ren):
E-mail:	E-mail:
Cell #:	Cell #:
Name of step-parent (if applicable):	Name of step-parent (if applicable):
May we publish your home phone and address information for class lists? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Church Affiliation

Is your family active in a church? \_\_\_\_ Yes \_\_\_\_ No   If you do not have a church home or are inactive in your church, would you be interested in information about Grace Lutheran Church? \_\_\_\_ Yes \_\_\_\_ No

Is your child Baptized? \_\_\_\_ Yes \_\_\_\_ No - If not, would you like information on Baptism? \_\_\_\_ Yes \_\_\_\_ No

Name & address of your church: \_\_\_\_\_ Pastor's name: \_\_\_\_\_

## Office Use Only

### School History for Students in Grades 1-12 Only

Most recent school & school's address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Most recent school's telephone number: \_\_\_\_\_

Most recent school's fax number: \_\_\_\_\_

Teacher's name: \_\_\_\_\_

Grade: \_\_\_\_\_

Has this student ever attended Grace Lutheran School?  Yes  No - If yes, when?

Has this student ever been suspended or expelled from school or been put on probation?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Has this student ever been involved in circumstances which led to an investigation by civil authorities?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

### Testing History for All Students

Has this student been tested or recommended for testing for any condition which might affect school performance (i.e., Attention Deficit Disorder, Attention Deficit Disorder with Hyperactivity, Learning Disabilities, Behavior/Emotional Disorders)?

Yes  No If yes, please explain. \_\_\_\_\_

Has your child received any assistance, such as special education, gifted/talented, behavior or resource intervention?

Yes  No If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

### Emergency Information for All Students

Physician:

Phone:

Dentist:

Phone:

Specific allergies & other conditions - if none, please write NONE.

Two other persons we may contact in case of emergency:

Name:

Phone:

Relationship:

Name:

Phone:

Relationship:

**IMMUNIZATIONS:** Grace Lutheran School is required by the State of Idaho to have complete immunization records on file for each enrolled student. All registrants must submit a copy of this information prior to attending.

**IN CASE OF EMERGENCY:** As the parent or legal guardian of the child named on this form, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

## Registration Fee

**ALL GRADES - \$175.00**

The registration fee must be included with this form.

\_\_\_\_\_ **(Amount enclosed)**

**SUMMERCARE ACTIVITY FEE - \$190.00**

The activity fee must be included with this form.

\_\_\_\_\_ **(Amount enclosed)**

## Please Check Your Preference

**Tuition Plan Preferred:** 12 equal payments (June 1 thru May 1) \_\_\_\_\_

9 equal payments (Sept. 1 thru May 1) \_\_\_\_\_ (available only to students in SummerCare or those registering after the beginning of the school year)

1 payment (due on or before May 31) \_\_\_\_\_ Deduct 3% from total tuition

**NOTE:** A participation fee will be charged per activity as students participate in those activities (please see fee schedule).

**SIGNATURE REQUIRED FOR NEW ENROLLMENT.** I agree to abide by the tuition policies of Grace Lutheran School & Early Childhood Center as stated on the Tuition Contract Agreement.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

The following must take place before a New Student's Application will be considered for review:

1. This form must be completed and turned in with the Registration Fee and all documents listed below. The Registration Fee is refundable only if enrollment is not granted, if parents wish for the student to be removed from the waiting list, or if the family moves 50 or more additional miles away from their residence at the time of application to the school.
2. The following documents must be included with the Application Form for all grades unless otherwise noted.
  - Registration fee
  - Activity Fee
  - Tuition Contract Agreement
  - Statewide Home Language Survey
  - A copy of the most recent report card (grades 1-12)
  - A copy of previous and/or the most recent standardized test scores (grades 1-12)
  - Other pertinent testing, if applicable (all grades)
  - A copy of up-to-date immunization records
  - A copy of the official Birth Certificate
  - A recent photograph
  - For grades 1-12, a Teacher's Evaluation Form is to be given to the present or prior teacher and mailed back to Grace Lutheran School.
  - An Applicant Profile must be completed by the parent(s) – grades K-12 (Preschool profiles will be completed at orientation).
  - FACTS Tuition Management account has been set up. New Applications and Re-Enrollments are considered as complete only if the family has also opened their FACTS Tuition Management account. Directions to set up your FACTS account will be e-mailed to you upon your child's acceptance to the school. Billing will only take place if the student is accepted for enrollment.
  - Completed Background Check for Volunteers &/or Employees Authorization Release (*This completed form is required for all adults who wish to volunteer to assist with students in any capacity.*)

In addition,

3. Grace Lutheran School & Early Childhood Center does not guarantee admission to any applicant. It is the mission of Grace Lutheran School & Early Childhood Center to provide a quality, Christian education to all of its students. Grace Lutheran School & Early Childhood Center recognizes that there may be an applicant for admission whose background and circumstances are such that the applicant would require extraordinary attention and/or resources and their admission would therefore disproportionately reduce the attention and resources available to other students. Grace Lutheran School & Early Childhood Center also recognizes that there may be an applicant with a background which suggests that the applicant may pose a potential risk to other students. Grace Lutheran School & Early Childhood Center must consider the best interest of its student body as a whole, and for this reason, it is the policy of Grace Lutheran School & Early Childhood Center to not accept such an applicant.
4. The signature below indicates that the parents are familiar with and agree to the policies of Grace Lutheran School & Early Childhood Center as expressed in the Preschool and/or Family Handbook, and that accounts over thirty (30) days past due may result in termination of enrollment.
5. I also give my child(ren) \_\_\_\_\_ permission to participate in all school/summer activities approved by the school. I understand my child will be participating in a variety of field trips and may attend movies (G or PG rated with school approval). All transportation will be on a school approved vehicle with certified drivers. I understand that Grace Lutheran, its teachers and/or drivers are not liable in case of an accident.

**All questions on this Application for Admission Form must be answered. False or misleading information, if later revealed as such, constitutes grounds for dismissal.**

\_\_\_\_\_  
Father's Signature (or Legal Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother's Signature (or Legal Guardian)

\_\_\_\_\_  
Date

Grace Lutheran School & Early Childhood Center admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national, and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs