TRINITY LUTHERAN SCHOOL



ENROLLMENT APPLICATION for 2021-2022

Student Information						
Last Name:	First Name:	M.I.:_	Preferred Name:			
Check which grade applying for:						
☐ Preschool 3 (P3) ☐ Preschool	ol 4 (P4) □ K □ 1 st □] 2 nd	□ 5 th □ 6 th □ 7 th □ 8	3 th		
Birth Date: ☐ Male ☐ Female Previous School:						
Baptism Date: Location of Baptism:						
Ethnic Origin (Check one): This is	nformation is used for st	ate and federal den	nographic reporting.			
☐ American Indian ☐ Black/Afri	can American □ Asian	☐ Hispanic ☐ Wh	nite/Caucasian 🗆 Multira	acial		
Who does the student reside with	1?					
☐ Both parents ☐ Mother ☐ Fa	ather Grandparent(s)	☐ Legal Guardiar	other than parents:			
Family Information						
Guardian 1:			Relationship to stude	ent:		
Last	First	M.I.				
Address:						
City: State: Zip:						
Home Phone:						
Business Phone:		:	Email:			
If applicable, Step-parent:	_ast	Firs	t	M.I.		
Guardian 1:	First	Re	elationship to student:			
Address:	·					
City: State: Zip:						
Home Phone:	Mobile P	'hone:	Text: 🗆	yes □ no		
Business Phone:	Employer	:	Email:			
If applicable, Step-parent:	ast	Firs		M.I.		
Additional Information						
Church Membership (if applicable	9):					
How did you first learn about Trin	ity?					

Use the spaces below for any siblings.

Last Name:	First Name:	_ M.I.:	Preferred Name:				
Check which grade applying for:							
□ Preschool 3 (P3) □ Preschool	4 (P4) □ K □ 1 st □ 2 nd □ 3 rd	□ 4 th □ 5 th	\square 6 th \square 7 th \square 8 th				
Birth Date:	☐ Male ☐ Female Previous Sc	hool:					
Baptism Date:	Location of Baptism:						
Ethnic Origin (Check one): This information is used for state and federal demographic reporting.							
\square American Indian \square Black/African American \square Asian \square Hispanic \square White/Caucasian \square Multiracial							
Who does the student reside with?							
☐ Both parents ☐ Mother ☐ Father ☐ Grandparent(s) ☐ Legal Guardian other than parents:							
Last Name:	First Name:	_ M.I.:	Preferred Name:				
Check which grade applying for:							
\square Preschool 3 (P3) \square Preschool 4 (P4) \square K \square 1 st \square 2 nd \square 3 rd \square 4 th \square 5 th \square 6 th \square 7 th \square 8 th							
Birth Date:	☐ Male ☐ Female Previous Sc	hool:					
Baptism Date:	Location of Baptism:						
Ethnic Origin (Check one): This information is used for state and federal demographic reporting.							
□ American Indian □ Black/African American □ Asian □ Hispanic □ White/Caucasian □ Multiracial							
Who does the student reside with?							
□ Both parents □ Mother □ Father □ Grandparent(s) □ Legal Guardian other than parents:							
Trinity Lutheran School admits and welcomes students of all races, religions, ethnic and national origins, and socio-economic backgrounds.							
I certify by my signature that the above information is correct. This form will be valid for one year from the date signed.							
Guardian Signature:	Name Printe	ed:	Date:				
This application is not binding on the applicant or the school.							
Please submit this completed enrollment form accompanied with:							
☐ Registration fee (Not refundable): 1st Child - \$100, each additional child \$50							
□ Copy of applicant's birth certificate							
□ Copy of applicant's immunizations							
□ Copy of current IEP (is applicable)							
☐ Tuition Payment Contract							
□ Academic records from previous school							