



## 4K APPLICATION FORM: NEW STUDENT

Date \_\_\_\_\_

School Year \_\_\_\_\_

Child's Full Name \_\_\_\_\_ Male or Female

Name and spelling for classroom use \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Home Phone \_\_\_\_\_ Birthdate \_\_\_\_\_

Email address: \_\_\_\_\_

	Father	Mother
Name		
Address		
Cell Phone		
Workplace		
Work Phone		

Marital status:    Married    Divorced    Never married    Separated

Custodial Parent (if applicable): \_\_\_\_\_

Sibling(s): name and age

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

(Please continue application on back)

Church affiliation:

Father \_\_\_\_\_ Member: Yes No  
Mother \_\_\_\_\_ Member: Yes No

All education at St. Paul's Ev. Lutheran School is guided and governed by the teachings of the Bible. Are you interested in attending a class which explains the teachings of St. Paul's Lutheran Church? Yes Maybe No

Has your child been baptized? Yes No

To help us meet the needs of your child, please inform us if your child has problems with hearing, vision, allergies, etc. (to enter the program, students will need to handle their own toileting needs):

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Will your child be attending another 4K program? If so, where?

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How do you think our program will benefit your child? \_\_\_\_\_

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How did you hear about us? \_\_\_\_\_

The Education Committee will review the applications in the order they are received. Keep in mind that preference will be given to members and current student's family members. You will receive a letter of acceptance to be sent out in April. The teacher will make a home visit in late July or early August to go over forms, policies, and other pertinent information.

Return the completed application with a check for the \$50 non-refundable registration fee payable to St. Paul's Lutheran School.

For office use:
Date rec'd: _____
Registration # in order rec'd _____
Fee Check #: _____