



# ADMISSIONS APPLICATION

## STUDENT INFORMATION Please Print

Student's Full Legal Name \_\_\_\_\_ Prefers to be Called \_\_\_\_\_  Male  Female

Date of Birth \_\_\_\_\_  Member of St. James  Sibling of Current Student  Sibling of Former Student

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Languages Spoken at Home \_\_\_\_\_ Applicant applied to St. James before?  Yes  No

Who does the applicant spend most of his or her day with?  Mother  Father  Grandparent  
 Nanny  Other Caregiver \_\_\_\_\_

Applying for Grade PS-2  PS-3  Pre-K  K  1st  2nd  3rd  4th  5th  6th  7th  8th

## CURRENT SCHOOL INFORMATION

Current School \_\_\_\_\_ Current Grade/ Program \_\_\_\_\_ Attended Since (mo/yr) \_\_\_\_\_

School Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Principal/Director \_\_\_\_\_ Teacher \_\_\_\_\_

### OFFICE USE ONLY

Date Received \_\_\_\_\_ Office Personnel \_\_\_\_\_

# PARENT/GUARDIAN INFORMATION

## Marriage Status of Parents

Parents Married       Parents Divorced       Parents Separated       Single Parent       Other \_\_\_\_\_

If parents are not married, who is the custodial parent? \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Relationship to Applicant

\_\_\_\_\_  
Relationship to Applicant

\_\_\_\_\_  
Address (if different than applicant)

\_\_\_\_\_  
Address (if different than applicant)

\_\_\_\_\_  
City                                  State                                  Zip

\_\_\_\_\_  
City                                  State                                  Zip

\_\_\_\_\_  
Home Phone                                  Cell Phone

\_\_\_\_\_  
Home Phone                                  Cell Phone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Occupation/ Position

\_\_\_\_\_  
Occupation/ Position

\_\_\_\_\_  
Place of Employment

\_\_\_\_\_  
Place of Employment

\_\_\_\_\_  
Nature of Business

\_\_\_\_\_  
Nature of Business

## College Education

(School Name, Degree Earned)

## College Education

(School Name, Degree Earned)

## Religious Affiliation

Lutheran       Catholic       Presbyterian

Evangelical       Methodist       Baptist

Other \_\_\_\_\_

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Lutheran       Catholic       Presbyterian

Evangelical       Methodist       Baptist

Other \_\_\_\_\_

\_\_\_\_\_  
Church Currently Attending

\_\_\_\_\_  
Church Currently Attending

# FAMILY INFORMATION

## Applicant's Siblings

Name Y/N	Age	School	Alumni of St. James-
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## Applicant's Paternal Grandparents

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Name

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Name

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Address

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City

State

Zip

*Please exclude from mailings from the school.*

## Applicant's Maternal Grandparents

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Name

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Name

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Address

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City

State

Zip

*Please exclude from mailings from the school.*

# STUDENT HISTORY

## School and Activity Information

### Aside from Current School, Other Schools Attended in the Last Three Years

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Name	Address	Director/Principal	Dates Attended
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Name	Address	Director/Principal	Dates Attended
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Name	Address	Director/Principal	Dates Attended
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**Please list any activities outside of school the applicant has participated in.**

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## Medical Information

Pediatrician \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Does your child have any medical conditions that he/she is currently being treated for?  Yes  No

Please Describe \_\_\_\_\_

## Church Information

Church Applicant Attends Most Frequently

Baptized  Yes  No Church \_\_\_\_\_ Date \_\_\_\_\_

First Communion  Yes  No Church \_\_\_\_\_ Date \_\_\_\_\_

Confirmed  Yes  No Church \_\_\_\_\_ Date \_\_\_\_\_

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What characteristics of St. James interest your family, and why is our school a good match for the applicant? (Feel welcome to use additional paper.)

## St. James Statement

St. James Lutheran School enrollment is open to students of any race, color or ethnic or national origin. Acceptance to a class is determined by the Admissions Committee on the basis of the optimum class profile. Members of the St. James fellowship, returning students and siblings of current students are given priority in the admission process. Admissions is subject to St. James being able to meet the educational needs of a student.

**Deposit Policy:** K-8 Deposits are applied to tuition when a student is accepted into a program. Deposits will be returned if a child is not accepted. A deposit will be forfeited if our acceptance is declined for any reason.

I have read the St. James Statement and understand the policies described.  Yes

Application Checklist:  Completed Application  Copy of Most Current Immunization Record  
 Copy of Birth Certificate  Copy of Most Recent Report Card (Gr. 1-8), New Students

Signature \_\_\_\_\_

Date \_\_\_\_\_