

**ZION LUTHERAN SCHOOL**

1400 Skeel Street  
Brighton, Colorado 80601  
303-659-3443

Date & Time received _____
Fee Paid \$ _____ Check# _____
Initials _____ (office use only)

**2010-2011 SCHOOL ENROLLMENT FORM**

This application is for enrollment in: K-am K-pm 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

**I need child care before/after school as well.**

Students must be 5 years old before Sept. 15<sup>th</sup>, 2010 in order to be placed in kindergarten. We will honor morning or afternoon preferences for kindergarten whenever possible.

Name of Child \_\_\_\_\_

(last) (first)

Address \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Baptized? Yes \_\_\_ No \_\_\_  
Date \_\_\_\_\_

Name of brothers and/or sisters and their dates of birth:  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Is either parent a member of Zion Lutheran Church? Yes \_\_\_ No \_\_\_  
If you have a church home other than Zion, please give its name and location. \_\_\_\_\_

Child is living with (please circle)

Both Parents Mother Father Stepmother Stepfather (Other) \_\_\_\_\_  
Parent or Guardian's Name(s) \_\_\_\_\_

Previous school (if any) child has attended:

Name of School	Address	Dates Attended
Does child have any physical or academic special needs? If so, explain on a separate paper and attach to this application.		

How did you hear about Zion Lutheran School?  
\_\_\_\_\_

Return:

- 1) Completed application form.
- 2) Check payable to **Zion Lutheran School** for registration fees.
  - in the amount of \$169.00 for Kindergarten.
  - in the amount of \$281.00 for Grades 1-8.

**Registration Fees will be refunded only if we cannot place your child.**
- 3) Current and/or past year's report card or evaluation report.
- 4) **Birth certificate and immunization record and copies of most recent achievement and/or ability tests must be turned into the Office NO Later than August 1<sup>st</sup>.**
- 5) Assessment testing may be required for new students (grades 1-8). Contact the school to make arrangements. Recent test scores (see #4) may suffice – check with the school office.
- 6) Two letters of reference from former teachers, coaches, youth counselors, or pastor are required for 6<sup>th</sup> – 8<sup>th</sup> grade applications. Please submit with the completed application.

"I do not give my permission for my child's name/picture to be outside of the school or parish newsletter."

Initials: \_\_\_\_\_ (Indicates denial of permission)

Name of person completing the application: \_\_\_\_\_