



**St. Paul Lutheran School**  
 201 Elm Street Northville, MI 48167  
 248-349-3146  
**Enrollment Application**

**Section A: Complete Section A & C for each additional child enrolled**

Date \_\_\_\_\_

Student Name: \_\_\_\_\_ Male/Female  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street Number & Name) (City) (Zip Code)

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

**Preschool:** 3yr old \_\_\_ 4yr old \_\_\_ **choose one:** 3-Day Half \_\_\_ Full \_\_\_ **OR** 5-Day Half \_\_\_ Full \_\_\_

**Young 5:** Half/Full \_\_\_\_\_ **Kindergarten:** Half/Full Day \_\_\_\_\_

**Grade:** 1st \_\_\_ 2nd \_\_\_ 3rd \_\_\_ 4th \_\_\_ 5th \_\_\_ 6th \_\_\_ 7th \_\_\_ 8th \_\_\_

Child's Birth date: \_\_\_/\_\_\_/\_\_\_ School Presently Attending \_\_\_\_\_

School District Where Child Lives: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_

**Section B:**

Father's Name: \_\_\_\_\_ Marital Status: M \_\_\_ S \_\_\_ D \_\_\_

Address (if different than child): \_\_\_\_\_ Occupation: \_\_\_\_\_  
(Street Number & Name) (City) (Zip Code)

Father's Employer: \_\_\_\_\_  
(Company Name) (Phone Number)

Mother's Name: \_\_\_\_\_ Marital Status: M \_\_\_ S \_\_\_ D \_\_\_

Address (if different than child): \_\_\_\_\_ Occupation: \_\_\_\_\_  
(Street Number & Name) (City) (Zip Code)

Mother's Employer: \_\_\_\_\_  
(Company Name) (Phone Number)

Legal Guardian (if not living with parents): \_\_\_\_\_

Languages Spoken at Home: \_\_\_\_\_

Sibling: \_\_\_\_\_  
(Child's Full Name) (Birthdate) (Grade)

Sibling: \_\_\_\_\_  
(Child's Full Name) (Birthdate) (Grade)

Sibling: \_\_\_\_\_  
(Child's Full Name) (Birthdate) (Grade)

Parents Church Membership \_\_\_\_\_

Student Church Membership: \_\_\_\_\_ Baptized? \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Where will child attend Church & Sunday School? \_\_\_\_\_

***In order, to best serve your child, please complete Section C below for each enrolling child.***

Student Name: \_\_\_\_\_

**Section C:**

Will you need to use our Extended Childcare Services program? _____		
	(Before School)	(After School)
What means of transportation will your child use? _____		
	(To School)	(After School)
Please indicate any special circumstances of which we should be aware:		
_____ Divorce	_____ Health Concerns	_____ Special Custody Arrangements
_____ Medication Needed During School	_____ Attention Issues	_____ Social Problems
_____ Emotional Difficulties	_____ Speech/Language Concerns	_____ Learning Difficulties
_____ Discipline Issues	_____ Evaluation for Special Services	_____ Other
If yes to any of the above, please explain: _____		
_____		
_____		
_____		
Has your child has an I.E.P.? _____ If yes, date of I.E.P.? _____		

**Section D:**

Please indicate how you heard of us: Printed Ad \_\_\_\_\_ Referred \_\_\_\_\_ Internet \_\_\_\_\_ Face Book \_\_\_\_\_ Other \_\_\_\_\_

**If referred, please list name(s):** \_\_\_\_\_

Please initial each line item below:

\_\_\_\_\_ I attest that the information contained in this application is accurate and that I have not willingly withheld any pertinent data necessary for the successful education of my child at St. Paul Lutheran School.

\_\_\_\_\_ I give permission for the Administration at St. Paul's Lutheran School to contact the school my child is currently attending.

\_\_\_\_\_ I understand that all new admissions will be subject to a probation period of six weeks from the first day of attendance.

X \_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

Please note that each tuition category is less than our per pupil cost due to the generous support by St. Paul Lutheran Church Congregation. Your sacrifice is providing a quality Christian education through St. Paul Lutheran School is greatly appreciated. To help us keep costs down, and to foster a family atmosphere in our school, you will be asked to complete a **Parent Volunteer Form in August.**