

**APPLICATION FOR ADMISSION: NEW STUDENT PRESCHOOL
ST. JOHN'S LUTHERAN SCHOOL**

3521 Linda Vista Avenue Napa California 94558

707.226.7970

Fax: 707.226.7974

PLEASE PRINT

Child's Name _____		Must be age by Sept. 1st
Last	First	Middle
Physical Address _____		
Street	City	Zip
Date of Birth _____	Home Phone _____	
Date of Baptism _____	Sex _____	
Father's Name _____	Occupation _____	Hours- Check One
		___ 1/2 day 8:30-12:00
		___ 3/4 day 7:30- 3:00
		___ Full day 7:30-5:30
Email _____	Cell Phone _____	Beginning _____
		(month/year)
Mother's Name _____	Occupation _____	
Email _____	Cell Phone _____	
Marital Status of Parents _____	Does Child Live With Both Parents? _____	

Explain any personal/confidential information the school/teacher needs to know of (i.e. divorce, separation, etc.) _____

List Siblings (Name, Age, School)

List any allergies, restriction/health concerns: _____

List any fears your child may have: _____

Has your child previously attended a nursery or preschool? ___ Yes ___ No

If "yes", where? _____

Is your child predominantly right or left-handed? _____

List any responsibilities your child has at home: _____

How do you discipline your child? _____

List any special help your child may need: _____

What is your child's attitude about entering school? _____

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Is your child accustomed to napping in the afternoon? Yes No Length of Nap _____

At what age did your child become toilet trained? _____

Reason for desiring to enroll your child: _____

Religious Affiliation _____ Place of Worship _____

Do you agree to support the school's program of Christian education by word and example, and to cooperate with the school in its program of Christian worship? Yes No

If accepted for enrollment, is it your intent to have your child attend St. John's Lutheran for their remaining elementary and middle school education? Yes No Undecided

Financial Responsibility:

- Application Fee: \$50 due with application
- Comprehensive Fee for new preschool students is due upon acceptance of the student: \$190 per student
- Monthly tuition payments will be due on the 1st of the month.
A late fee of \$25.00 is assessed on all accounts not paid by the 10th of each month.
A \$10 fee is assessed for any check not honored by the bank.

All fees are subject to change without notice and are non-refundable.

I have read the information regarding my financial commitments and agree to pay.

Signature of Parent or Guardian

Date

Application must be accompanied by:

- Application Fee: \$50.00 (payable by cash or check; non-refundable)
- Copy of Birth Certificate

*But those who hope in the Lord will renew their strength. They will soar on wings like eagles;
they will run and not grow weary, they will walk and not be faint.*

Isaiah 40:31