

ZION LUTHERAN SCHOOL APPLICATION INFORMATION

Dear Parents,

Thank you for applying to Zion Lutheran School. Please take the time to accurately complete the enrollment application so that we may better serve your child. Once your application is complete, attach a **\$40 application fee** and turn it into the school office.

Once your child is officially accepted and enrolled, a \$430 registration fee must be paid which is not refundable unless you are moving and give the school office notice at least thirty (30) days before the first day of the new school year which will be acknowledged in writing by the school office.

Items to bring to the Interview/Academic Assessment

- Most Recent Report Card
- Most Recent Standardized Test Scores (examples include TCAP, Stanford 10, Iowa Basic, etc..)
- A **CERTIFIED** birth certificate
- Zion Lutheran Student Profile Sheet (attached)
- Anything you feel our school would need to help us make an informed decision regarding your child

Tuition Assistance

If you will be applying for tuition assistance, please indicate this on your application. Anyone from the office will provide you with the resources you need to complete the financial aid application.

Timeline

Zion Lutheran School accepts applications any time. Current ZLS families have until June 1st to re-register for the next school year. New students may be accepted and enrolled before June 1st if space is available in those classrooms. If you have any questions regarding the application process, please contact the school office. We would be happy to help you.

Sincerely,
Nicholas Muench, principal





ZION LUTHERAN SCHOOL
3840 W. 216th St. Matteson, IL 60443
Ph 708-747-7490 Fax 708-747-1194
www.zismatteson.org

OFFICE USE ONLY	
Date Rec.	_____
Reg. Fee	_____
Check No.	_____

APPLICATION FOR ENROLLMENT

PK-4 Morning 8:30-11:00

Grade K 1 2 3 4 5 6 7 8

Method of payment annual semi-annual monthly (FACTS tuition)

APPLICATION FEE OF **\$40** MUST ACCOMPANY THIS APPLICATION

Zion Lutheran School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Zion Lutheran School may not be equipped or staffed to meet the needs of all children, and we recognize that other schools may be better equipped to serve some children with special needs and challenges.

STUDENT INFORMATION

Name _____

Address _____ Phone _____

City/State/ Zip _____ Birth date _____

Sex Male Female

Student lives with Both Parents Mother Father Guardian: _____

Name of school student last attended _____

Address of school student last attended _____

Grade(s) attended _____ Dates attended _____

PARENT/GUARDIAN INFORMATION

Circle One: Father Stepfather Guardian _____

Address _____ City/St/Zip _____

Occupation & Employer _____

Phone Numbers: Business _____ Home _____ Cell _____

Email Address _____

Marital Status Married Single Divorced Custody Alert? Yes ___ No ___

Circle One: Mother Stepmother Guardian _____

Address _____ City/St/Zip _____

Occupation & Employer _____

Phone Numbers: Business _____ Home _____ Cell _____

Email Address _____

Marital Status Married Single Divorced Custody Alert? Yes ___ No ___

FAMILY INFORMATION

Brother(s) and/or sister(s) name	Age	Grade	School Attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Does your family currently have a church home? Yes No If yes, Name: _____

Are you interested in learning more about Zion Lutheran Church? Yes No

Is your child baptized? Yes No If yes, date of baptism: _____

How did you hear about our school? Brochure Website Phone Book Newspaper
Recommendation by family or friend: Name _____
Other please specify: _____
Please rank #1- #5 the following reasons for enrollment, #1 being the most important: _____ Christian Emphasis _____ Quality _____ Academics _____ Safety _____ Location _____ Other: _____
Why are you considering Zion Lutheran School? _____ _____ _____
A limited amount of financial assistance is available. Will you be applying for assistance? Yes No

PLEASE READ

- A. Full Registration fee MUST accompany this application.
- B. Once the application for enrollment has been approved; refer to the current school board policy regarding refunds if you decide to withdraw your child from enrollment.
- D. All parents are expected to give of their time throughout the year as a volunteer.
- E. All new students accepted and enrolled are on a 9-week probationary period.

Parent's Pledge and Agreement

We agree to lead our children and family in regular Christian worship, to guide our children in a God-pleasing prayer life, and with the help of the Lord to conduct our lives in His service. We agree to meet with teachers regularly to discuss our child's progress. Finally, we agree to be faithful in regular payments of tuition and fees as were explained to us in the financial information packet.

Printed Name of Parent(s)/Guardian(s) _____

Signature of Parent(s)/Guardian(s) _____ Date _____

STUDENT PROFILE

Student's Name: _____

Please answer yes or no to the following questions:

Has student repeated a grade?	Yes	No
Receiving tutoring?	Yes	No
Participated in a special learning program?	Yes	No
Participated in a talented and gifted program?	Yes	No
Received special honors or awards?	Yes	No
Experienced learning difficulties in Reading?	Yes	No
Experienced learning difficulties in Math?	Yes	No
Experienced discipline problems?	Yes	No
Ever been suspended or expelled from school?	Yes	No

Please comment about any of your responses.

Mark "S" on subjects in which you believe your child will be academically strong.
Mark "A" on subjects in which you believe your child will be academically average.
Mark "H" on subjects in which you believe your child needs help and encouragement.

_____ Reading _____ Mathematics _____ English _____ Spelling _____ Social Studies
_____ Science _____ Handwriting _____ Music _____ Phys. Ed. _____ Art
_____ Religion _____ Memory Work _____ Computer

Educational maturity:

Social maturity and personality:

Physical health (including any allergies and/or restrictions):

Any needs or concerns Zion Lutheran School should know about:

List your child's hobbies, interests and extra-curricular abilities outside of school (include any awards):

What are your child's academic strengths?

Is your child on any special medications? (Please list medications and reasons needed.)

Parent Signature _____ Date _____