

# APPLICATION FOR ADMISSION: NEW STUDENT KINDERGARTEN-8th GRADE ST. JOHN'S LUTHERAN SCHOOL

3521 Linda Vista Avenue, Napa California 94558 707.226.7970 fax 707.226.7974

**Attach application fee, copies of most recent report card and standardized test scores.**

Student Name \_\_\_\_\_ Current Grade \_\_\_\_\_  
Last First Middle Applying for Grade \_\_\_\_\_

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

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex F M Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Business Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Business Address \_\_\_\_\_

Parents' Marital Status M Sep. Sing. D Does Child Live With Both Parents? YES NO

Brothers or Sisters (Name, Age & School)

Religious Affiliation \_\_\_\_\_ Place of Worship \_\_\_\_\_

Date of Child's Baptism \_\_\_\_\_

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

**Previous School(s) List below beginning with most recent:**

School & Address Grade(s) Dates

School & Address Grade(s) Dates  
**(Please turn over.)**

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**Briefly describe your child in the following areas:**

Educational Maturity\_\_\_\_\_

Social Maturity and Personality\_\_\_\_\_

Physical Health (include any allergies/restrictions)\_\_\_\_\_

Needs/concerns of which the school should be aware:\_\_\_\_\_

Reason for desiring to enroll your child:\_\_\_\_\_

How did you hear about our school? :\_\_\_\_\_

**Financial Responsibility**

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

**Application Fee: \$50.00, due with application. Upon an opening: \$75.00 entrance screening K-2; \$25.00 entrance screening 3-8 due at time of screening & upon acceptance Comprehensive Fee: \$375.00, due June 1st or within 3 weeks of acceptance. All fees are non refundable.**

\*\*Fees subject to change without notice

Tuition is due on the 1<sup>st</sup> of the month. A late fee of \$25.00 is assessed on all accounts not paid by the 10<sup>th</sup> of each month. **All fees are non refundable.**

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

*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*