

Trinity Lutheran School
Centralia, IL
Application for Admissions

School Year: _____

Grade: _____

Student Information

Last Name	First Name	Initial
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Birth Date: _____

Baptismal Date: _____

Parent Information

Father: Last Name _____ First Name _____ Initial: _____
Address: _____ City _____ Zip _____
Home Phone: _____ Cell Phone: _____ Email _____

Mother: Last Name _____ First Name _____ Initial: _____
Address: _____ City _____ Zip _____
Home Phone: _____ Cell Phone: _____ Email _____

Family Information

Child lives with: Parents: _____ Mother: _____ Father: _____ Step Parent: _____ Other: _____

Father's Occupation: _____

Company Name: _____

Work Phone: _____

Mother's Occupation: _____

Company Name: _____

Work Phone: _____

Local Church Membership: _____

Pastor's Name: _____ Phone: _____

Brother/Sisters	Age	School	Grade
_____	_____	_____	_____
_____	_____	_____	_____

Name of Previous School Attended: _____

Address: _____

Phone: _____

Has your child every received Special Educational Services: Yes _____ No _____

Please state why you wish to enroll your child(ren) in Trinity Lutheran School. This section must be filled out.

We ask that you read the following statements which outline the educational philosophy of Trinity Lutheran School and with your signature give your agreement to these statements.

1. We understand that all students in every grade will be taught the Doctrines of the LCMS. We believe that the strength of our curriculum rests in the fact that it is Christ-centered and that the atmosphere wuner which it exists is based on the Christian faith and God's Word.
2. We will be faithful in attending the church of our choice and will take our children to church. Believing that the home, in addition to the school, is also a center for Christian education, we will carry out the responsibility that God has given us as parents to instruct, train and direct that growth of the children God has placed in our care.
3. We will support the faculty of Trinity Lutheran School in its endeavor to give the children a basic education in all areas of the curriculum. We will communicate with our children's teachers on a regular basis and will pray for them.
4. We will meet our financial obligations to Trinity Lutheran School as expected, according to its policy. If we are unable to meet these obligations, we will communicate with the school's principal concerning our problem so that a reasonable solution may be found.
5. We will support the Parent Teacher League in its total programs/meetings and discussions with the faculty and assisting the PTL in meeting its financial commitments.

We, the undersigned, do hereby certify all information to be complete and factual, do hereby agree to fulfill all financial obligations, and agree to adhere to the policies and regulations as required by Trinity Lutheran School.

Date _____ Signatures _____

Trinity Lutheran School admits students of any race, color, sex, and national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sex, or national or ethnic origin in the administration of its educational policies, admission policies, financial assistance, and other school administered programs.