



Shepherd of the Valley Lutheran School

APPLICATION FOR **PRESCHOOL** ADMISSION

Student Information		
Student's Name	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth	Place of Birth	
Has your child attended school before? If so, where?		
Applying for School Year	Applying for: Half Day (8:15-11:30) _____ Full Day (8:15-3:45) _____ Pick 2 days (M,W or W,F) _____ 3 days (M, W, F) _____ 5 days _____	
Parent Information		
Father's Name	Mother's Name	Telephone
Address		City, State, Zip
Father's Occupation	Employed by	Telephone
Mother's Occupation	Employed by	Telephone
Family Information		
Sibling Name(s)	Date of Birth(s)	
If Parents are divorced or separated, please fill out this next section.		
If Parents are divorced or separated, to whom should admissions correspondence be sent? Father Mother Both (circle all that apply)	With whom does the child reside? Father Mother	
If you wish correspondence to be sent to another address, please indicate here: Yes	Address, City, State, Zip	
Church Information (circle all that apply)		
Name of Church currently attending _____	Is your child Baptized? Yes No Date _____	
Are you an active member of your church? Yes No	Does your child regularly attend church? Yes No Does your child regularly attend Sunday School? Yes No	
Reasons for Enrollment		
Why do you wish to enroll your child in Shepherd of the Valley Lutheran School?		

(Continued on back)

How did you hear about us?

Parent Signatures

Father's signature	Date
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Mother's signature	Date
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Email Address:

What school district do you reside in?

**Please refer to the Tuition Payment Policy for detailed information.
Choose one of the following:**

- Single Payment**
- Monthly, Weekly, or semimonthly payments (Thrivent's Simply Giving Program)**
- Special Payment Program** (only if approved by the SVLS school board prior to registration)

A \$150 non-refundable registration fee per student is required with submission of the Application for Admission Form. This amount will be applied to the tuition fee. Checks may be made payable to Shepherd of the Valley Lutheran School. The maximum non-refundable registration fee per family is \$300.

Extended Day Program		I will NOT be using EDP
Please indicate which of the following you will be using:		
_____ Before Care (7:00 - 8:00)	Arrival Time _____	
_____ After Care (3:45 - 5:30)	Pick Up Time _____	

A \$10 per family registration fee must accompany this form if you will be using our EDP program. The times you put down will give us an idea of how many children we will have each day. You will fill out a form with exact times every two weeks and pay an hourly rate of \$4.00 per child.

Mission Statement

*Shepherd of the Valley Lutheran School exists to assist parents in our congregations and communities in their God-given responsibility to bring their children up in "the training and instruction of the Lord."
A shared Ministry of Bethel, Mount Calvary, and St. Luke Lutheran Church*