

2017-2018 -- Application for Enrollment

Welcome! You have made your decision and are taking the first step toward enrolling a new student at Baton Rouge Lutheran School (BRLS.) Completing this online application form is the beginning of a simple admissions process.

The next steps you must take to complete the enrollment process will be (1) paying the appropriate fee amount to hold a place for your student in the admissions queue, (2) providing documents required by the state of Louisiana and/or for review by our school principal, and, finally, (3) meeting with the school principal.

If you have any questions while completing this application or in the steps that follow, don't hesitate to contact Baton Rouge Lutheran School (BRLS) for help.

Janet Schmieder, Admissions Counselor

BRLS Office: (225) 272-1288

E-mail: admissions@brlutherschool.org

*** Required**

Name of the Applicant: *

Applying for Grade Level: *

- Preschool (3 years old on or before September 30, 2017)
- Prekindergarten (4 years old on or before September 30, 2017)
- Kindergarten (5 years old on or before September 30, 2017)
- First Grade (6 years old on or before September 30, 2017)
- Second Grade
- Third Grade
- Fourth Grade
- Fifth Grade
- Sixth Grade
- Seventh Grade
- Eighth Grade

Name of Adult Completing This Application for Enrollment: *

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* Required

All About The Student -- Basic Information, Background and Health

Policy of Nondiscrimination: Baton Rouge Lutheran School admits students of any race, color, national and ethnic origin to all 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, national or ethnic origin in administration of its educational policies, admissions policies, athletic and other school administered programs.

Applicant's Full (Legal) Name *

A copy of the child's birth certificate will be needed. (Required by the Louisiana Department of Education for every student.)

Nickname or Preferred (First) Name teachers and classmates should use: *

Date of Birth: *

mm/dd/yyyy

Applicant's Gender:

(School required to report to the Louisiana Department of Education)

- Female
 Male

Applicant's Race:

(The Louisiana Department of Education requires each school to file a report using these racial categories.)

- Alaskan Native
 American Indian
 Asian
 Black/African American
 Hispanic/Latino of any race
 Native Hawaiian/Pacific Islander
 Two or more Races
 White

Why do you desire to enroll this child at Baton Rouge Lutheran School? *

We ask that at least one parent or guardian explain what the family's hope is for the applicant.

Name of school applicant is currently attending:

Did that school refuse to readmit your student?

- No
 Yes

Has this student ever been suspended from any school?

- No
 Yes

Has this student ever been expelled from any school?

- No
 Yes

Date child was baptized, if applicable

mm/dd/yyyy

Church where child was baptized, if applicable

Church child currently attends, if applicable

Has your child ever had an educational, psychological, or neurological evaluation?

(I you answer YES, plan to provide a copy of the evaluation for review by the school principal.)

- No
 Yes

Is your child in physical/occupational therapy?

- No
 Yes

Is your child in speech therapy?

- No
 Yes

List any physical, emotional or behavioral difficulties of this prospective student:

[Empty text box for listing physical, emotional, or behavioral difficulties]

Does the prospective student take any prescription or other medications on a regular basis?

- No
- Yes

If you answered "YES," list the medication name(s) and dosage(s), along with the reason for taking each medication:

[Empty text box for listing medication names, dosages, and reasons]



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* Required

All About The Student's Home

Parent(s) or Guardian(s) with whom student primarily resides *

[Examples: Jack & Jill Jones or Sue Smith] Information about each individual parent or guardian will be requested next. We simply want to be certain of the one address we can direct time-sensitive information that impacts the admission process, as well as about school closures or other emergency notifications during the next school year.

Street Address (where student primarily resides/resides during the school week) *

City: *

State (2-letter abbreviation): *

Zip (5 digits only) *

Phone linked to address above, including area code *

(List whatever you consider that residence's home number whether it is a landline or cell phone number.)

Adult E-mail linked to where the student resides

(List an e-mail that is regularly checked by one parent or guardian)

Custody of this applicant:

(Plan to provide a copy of any custodial agreement between divorced parents.)

- Parents or Guardians (shared in a single household)
- Parents or Guardians, Shared Custody (separated or divorced with multiple households)
- Only One Parent or Guardian (with sole custody)
- Other:

Person(s) who will be financially responsible for Tuition? *

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.....
Person(s) who will be financially responsible for other school expenses? *
(Examples: Before or after school care, hot lunches, lost books, etc.)

.....
.....

.....



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All About the Student's Parents or Guardians

Provide information on up to five parents or guardians. When there is a separation or divorce, we ask you include information on all parents and step-parents of the student.

If the person(s) financially responsible for any payments of tuition, fees, childcare, hot lunches, etc. is not a parent or guardian, please list their relationship beside "Other." Providing their contact information will help us complete tuition payment arrangements and send school statements for other expenses.

Information about Each Parent or Guardian, #1

Relationship to Applicant:

- Father
- Mother
- Stepfather
- Stepmother
- Other:

Salutation

- Mr.
- Mrs.
- Ms.
- Dr.
- Rev.

First Name

Last Name

Suffix, if applicable

Street Address

City

State (2-letter abbreviation)

Zip (5 digits only)

Home Phone, including area code
(Can be same as Cell Phone)

Cell Phone, including area code

Work Phone, including area code

E-mail Address

Must be unique. Cannot list same e-mail address for two or more contacts.

Occupation:

Place of Employment

Religious Affiliation (Denomination) of #1 Parent's Church, if applicable

Name of Church #1 currently attends, if applicable

Information about Each Parent or Guardian, #2

Relationship to Applicant:

- Father
- Mother
- Stepfather
- Stepmother
- Other:

Salutation

- Mr.
- Mrs.
- Ms.
- Dr.
- Rev.

First Name

Last Name

Suffix, if applicable

Street Address

City

State (2-letter abbreviation)

Zip (5 digits only)

Home Phone, including area code

(Can be same as Cell Phone)

Cell Phone, including area code

Work Phone, including area code

E-mail Address

Must be unique. Cannot list same e-mail address for two or more contacts.

Occupation:

Place of Employment

Religious Affiliation (Denomination) of #2 Parent's Church, if applicable

Name of Church #2 currently attends, if applicable

Information about Each Parent or Guardian, #3

Relationship to Applicant:

- Father
- Mother
- Stepfather
- Stepmother
- Other:

Salutation

- Mr.
- Mrs.
- Ms.
- Dr.
- Rev.

First Name

Last Name

Suffix, if applicable

Street Address

City

State (2-letter abbreviation)

Zip (5 digits only)

Home Phone, including area code

(Can be same as Cell Phone)

Cell Phone, including area code

Work Phone, including area code

E-mail Address

Must be unique. Cannot list same e-mail address for two or more contacts.

Occupation:

Place of Employment

Religious Affiliation (Denomination) of #3 Parent's Church, if applicable

Name of Church #3 currently attends, if applicable

Information about Each Parent or Guardian, #4

Relationship to Applicant:

- Father
- Mother
- Stepfather
- Stepmother
- Other: _____

Salutation

- Mr.

- Mrs.
- Ms.
- Dr.
- Rev.

First Name

Last Name

Suffix, if applicable

Street Address

City

State (2-letter abbreviation)

Zip (5 digits only)

Home Phone, including area code

(Can be same as Cell Phone)

Cell Phone, including area code

Work Phone, including area code

E-mail Address

Must be unique. Cannot list same e-mail address for two or more contacts.

Occupation:

Place of Employment

Religious Affiliation (Denomination) of #4 Parent's Church, if applicable

Name of Church #4 currently attends, if applicable



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Sibling Information

Does this sibling attend Baton Rouge Lutheran School?

If the answer is YES, you may be eligible for a multi-child discount.

Yes

No

Sibling's First Name

Sibling's Last Name

Sibling's Date of Birth

mm/dd/yyyy

Does the 2nd sibling attend Baton Rouge Lutheran School?

If the answer is YES, you may be eligible for a multi-child discount.

Yes

No

Sibling's First Name

Sibling's Last Name

Sibling's Date of Birth

mm/dd/yyyy

Does the 3rd sibling attend Baton Rouge Lutheran School?

If the answer is YES, you may be eligible for a multi-child discount.

Yes

No

Sibling's First Name

Sibling's Last Name

Sibling's Date of Birth

mm/dd/yyyy

Does the 4th sibling attend Baton Rouge Lutheran School?

If the answer is YES, you may be eligible for a multi-child discount.

Yes

No

Sibling's First Name

Sibling's Last Name

Sibling's Date of Birth

mm/dd/yyyy
