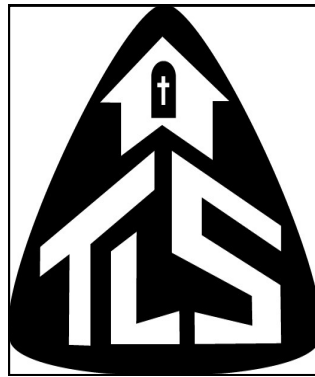


TRINITY

Lutheran School and Early Childhood Center



A Caring Place

Serving Children and their Families Since 1954

40 W. Nicholai Street
Hicksville, NY 11801
Tel: 516-931-2211
Fax: 516-931-6345
Admissions@TrinityLI.org
www.TrinityLI.org

Child's Name _____

Male/Female _____

(Last)

(First)

(Middle)

Home Address _____

City _____ **Zip Code** _____

Home Phone Number _____ Family Email Address _____

Student resides with _____
(Name) (Relationship)

If you require a second mailing of report cards, tuition billing, etc., please specify to whom and the address:

(Name) (Relationship) (Address)

Date of Birth _____ City, State/Country of Birth _____

Date of Baptism _____ Child's Religious Affiliation _____

Name of Public School District _____

Name of Preschool or Pre-K Program _____

School Address _____

Years Attended _____ School Phone _____

Parent Info	<u>Father</u>	<u>Mother</u>
Name	_____	_____
Occupation	_____	_____
Employer	_____	_____
Business Phone	_____	_____
Cell/Beeper Number	_____	_____
Email Address	_____	_____
Church Membership	_____	_____
City/County	_____	_____

Who should we contact with questions regarding your child's application? _____

Preferred contact number? _____

Please tell us about any additional children in your family.

Brother(s)/Sister(s)	Name	Date of	Current	Current School

**Please note: Students applying for kindergarten must have reached their 5th birthday by the cut-off date determined by their local school district.*

How did you first hear about Trinity Lutheran School? _____

If you were referred by a current school family, please provide us with their name.

Please Tell Us About Your Child

How would you describe your child? _____

Is your child involved in any extracurricular activities? _____

What are your child's strengths in school, in your opinion? _____

What are your child's weaknesses in school, in your opinion? _____

Has your child had any social or behavioral problems in school? Please explain. _____

Does your child have a learning disability or physical handicap? Please explain. _____

Does your child have an Individualized Educational Plan (IEP) or 504 Plan and, if so, for what area(s)?

Your child will be expected to attend religious courses and weekly chapel. How do you and your child feel about this? _____

Is there anything we should know about your child that would help us in this application process?

Do you plan to continue your child's education at Trinity through the eighth grade? _____

Would you require after care for your child? (available for kindergarten through grade 8) _____

Publicity Policy

Students may be photographed or videotaped for the purpose of positive school communication and publicity, unless the parent or guardian submits a written request that the child not be photographed. If no such written request is received, it will be assumed that the student may appear in pictures or videos associated with school publicity. The written request should accompany this form.

Resource Services

There are times when a student may require more educational support than Trinity Lutheran School is able to provide. If such a situation arises, Trinity Lutheran may request that the student be evaluated by the Hicksville Public school district. If a student qualifies for services, the school district will provide them at our school. If Trinity administration recommends that your child be evaluated for additional support, we expect the parent(s)/guardian(s) will be willing to pursue services for the student.

Yes, I would comply with a request to have my child evaluated by the Hicksville Public School District.

Parent/Guardian's Signature

Application / Testing Fee

The application/testing fee of \$50.00 must accompany this form. The application/testing fee is non-refundable. Please make checks payable to **Trinity Lutheran School**.

A positive and constructive working relationship between Trinity Lutheran School and Early Childhood Center and a student's parent(s)/guardian(s) is essential to the fulfillment of Trinity's educational purpose. Thus, Trinity reserves the right not to extend the privilege of enrollment/re-enrollment to a student if Trinity concludes that the actions of the parents(s)/guardian(s) make such a positive and constructive relationship impossible or otherwise seriously interfere with Trinity's accomplishment of its educational purpose. Trinity also reserves the right not to extend the privilege of enrollment/re-enrollment if all information on the application is not truthful. Grade/classroom placement is determined by Trinity Lutheran and does not constitute a part of this contract or its subsequent renewals. Such placement is governed by Trinity Lutheran-administered tests and the School Handbook. Any conduct by a student which is in violation of the Student Handbook and which Trinity administration considers detrimental to the student or to other students of Trinity Lutheran, may be deemed adequate cause for appropriate disciplinary action, including suspension or dismissal. No transcripts will be released unless all financial obligations are satisfied. Trinity Lutheran School admits students of any race, religion, nationality, and ethnic origin to all the rights, privileges, programs, and activities accorded or made available to students at the school. Trinity does not discriminate on the basis of race, color, nationality, or ethnic origin in the administration of its educational policies and athletic or other school-administered programs.

<i>For Office Use</i>	
Rec'd _____	Ack'd _____
App Fee _____	
Test Date _____	
Scores _____	
Interview _____	
Records _____	Birth Cert. _____
Medical Records _____	
Accepted _____	
Reg. Date _____	
Reg. Fee _____	
Textbook Req. Ret. _____	
HPS SED _____	Cmptr Use _____
Child's Photo _____	