



# APPLICATION for ADMISSION

1234 NE Riddell Road    Bremerton, WA 98310    Office: (360) 373-2116    Fax: (360) 377-0686    www.peacebremerton.org

**APPLYING FOR GRADE:** \_\_\_\_\_ **SCHOOL YEAR:** \_\_\_\_\_ - \_\_\_\_\_

**Student's Name:** (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Sex:**  Male  Female **Social Security** \_\_\_\_-\_\_\_\_-\_\_\_\_

**Ethnicity** (*reporting data*) \_\_\_\_\_ **U.S. Citizen?**  Yes  No **Adopted?**  Yes  No

**Date of Baptism:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Baptismal Church:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Parent's Marital Status:**  Married  Divorced  Separated  Single  Widow/Widower

**If divorced, who has legal custody of the student?**  Father  Mother  Joint

*Please attach court documentation regarding custody to this application.*

**Student Lives With:**  Father  Mother  Stepfather  Stepmother  Other: \_\_\_\_\_

FATHER/GUARDIAN	MOTHER/GUARDIAN
Name: _____	Name: _____
Address: _____	Address: _____
City: _____ Zip: _____	City: _____ Zip: _____
Occupation: _____	Occupation: _____
Employer: _____	Employer: _____
Home Phone: (____) _____	Home Phone: (____) _____
Work Phone: (____) _____	Work Phone: (____) _____
Cell Phone: (____) _____	Cell Phone: (____) _____
Email: _____	Email: _____
Ethnic Group: _____	Ethnic Group: _____
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Peace Lutheran Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Peace Lutheran Member? <input type="checkbox"/> Yes <input type="checkbox"/> No
Member of another church? <input type="checkbox"/> Yes <input type="checkbox"/> No	Member of another church? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, name of church _____	If yes, name of church _____

STEPFATHER	STEPMOTHER
Name: _____	Name: _____
Occupation: _____	Occupation: _____
Work Phone: _____	Work Phone: _____

<b>LAST SCHOOL/CENTER ATTENDED</b> Name: _____ Address: _____ City/Zip: _____ Phone: (_____) _____	<b>SIBLINGS</b> (Name and Current Grade) 1. _____ / _____ 2. _____ / _____ 3. _____ / _____
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Academic Strength? \_\_\_\_\_ Academic Weakness? \_\_\_\_\_

Has the student ever been evaluated for: (If yes, please explain on a separate sheet)

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Have there been any situations in the student's life which the school should know about in order to meet his or her learning or development needs? (e.g. frequent moves, frequent changing of schools, divorce, etc.)

Extracurricular interests, abilities, achievements, musical instruments played? \_\_\_\_\_

Are there any special health concerns of which the school should be aware? \_\_\_\_\_

How did you hear about Peace Lutheran? \_\_\_\_\_

Reason for requesting enrollment at Peace Lutheran? \_\_\_\_\_

**Non-Discriminatory Policy: Peace Lutheran School admits students of any race, color, 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, national or ethnic origin in administration of its policies, admission policies, scholarship and loan programs, and athletic and other school administered programs.**

**I hereby certify the information on this application is accurate and complete and inaccurate or incomplete information may result in a non-acceptance or dismissal from school.**

Signed \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_  
(Parent or legal guardian)