

PRE SCHOOL APPLICATION (FULL DAY PRE- K)

St. Thomas Lutheran School-ECC
21211 Detroit Road
Rocky River, Ohio 44116

Date _____
School Year _____

Registration Fee must accompany application form.
Please provide a copy of child's birth certificate.

STUDENT INFORMATION

Name of Student _____ Date of Birth _____

Home Address _____ City _____ State & Zip _____

Gender : () Male () Female

Ethnic Origin: ()Caucasian ()African American ()Hispanic ()Asian American ()Other

Student lives with: () Mother () Father () Both Parents () Guardian () Other

Student Attends Church () Yes () No If Yes, Where _____

Baptized? () Yes () No Date & Place of Baptism _____

FAMILY INFORMATION

Father's Name _____

() Biological () Guardian () Stepfather or Title: _____

Married () Divorced () Separated () Remarried () Widowed ()

Employer _____ Work Phone # _____

Work Address _____

Home Phone # _____ Cell Phone # _____

E-mail Address _____

Mother's Name _____

() Biological () Guardian () Stepmother or Title: _____

Married () Divorced () Separated () Remarried () Widowed ()

Employer _____ Work Phone # _____

Work Address _____

Home Phone # _____ Cell Phone # _____

E-mail Address _____

Sibling(s) Names	Age	Grade	School Attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

St. Thomas Lutheran School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. The school does not discriminate on the basis of race, color, national or ethnic origin in administration of educational policies, admission policies, grant-in-aid program, and athletic and other school administered programs.