

Application for Enrollment

Illinois Lutheran Schools

1610 Main Street
Crete, Illinois 60417
(708) 672-3262



Illinois Lutheran Schools is an educational ministry of Trinity and Zion Evangelical Lutheran Churches of Crete, Illinois. Our school is governed by the Board of Directors of Illinois Lutheran Schools, Inc., a daughter corporation of Trinity and Zion created to oversee and carry out this ministry.

Illinois Lutheran Schools, Inc. is an association of congregations committed to the principles of Holy Scripture as espoused by the Wisconsin Evangelical Lutheran Synod. Illinois Lutheran Schools 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 and ethnic origin in administration of educational policies, calling of teachers, hiring of staff, admissions policies, scholarship and loan programs, and athletic and other school administered programs.

The primary purpose of Illinois Lutheran Schools is to teach students the Word of God so they may know their Savior, Jesus Christ, as the one and only way to heaven. Our school provides a solid academic education which is taught from the Christian perspective. Religious instruction is a regular part of the curriculum for all pupils. The structure, philosophy, and policies of the school are printed in the Parent-Student Handbook and should be read by all parents who are considering enrollment in the school.

Our Mission

Illinois Lutheran Schools provides quality, Christian education to students of the Church and community, nurturing and reaching souls for time and eternity.



Student's Information

Full Legal Name (first, middle, last): _____

Address: _____ Phone: _____

City, State & ZIP: _____ Date of Birth: ____/____/____

Baptized: Yes No Denomination: _____ Church: _____

Pastor: _____ City & State: _____

If NO, do you plan to have the child baptized? _____

This child lives with: _____

Name all who have legal custody of this child: _____

Ethnic Origin (As required by the State of Illinois)

African American Caucasian Asian Hispanic Native American Two or more

Father's Information

Father's Legal Name: _____ Phone: _____

Address (if different from child): _____

City, State & ZIP: _____ Date of Birth: ____/____/____

Email: _____

Occupation: _____ Employer: _____

Name and address of church where you actively participate and/or hold membership (if none, write "none"):

Marital Status: Married Separated Divorced Widowed Remarried Single

Mother's Information

Mother's Legal Name: _____ Phone: _____

Address (if different from child): _____

City, State & ZIP: _____ Date of Birth: ____/____/____

Email: _____

Occupation: _____ Employer: _____

Name and address of church where you actively participate and/or hold membership (if none, write "none"):

Marital Status: Married Separated Divorced Widowed Remarried Single

Previous School Attendance

Previous School Attended: _____

Address of school: _____

City & State of school: _____

Last grade completed: _____ Grade entering (as of September 1): _____

Reason for leaving that school: _____

Other Children in the Family

Name	Age	Grade	School	Baptized
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please state specifically, why you wish to enroll your child in Illinois Lutheran.

At this time, do you anticipate sending your child to Illinois Lutheran Junior High through eighth grade? (Please explain)

At this time, do you anticipate sending your child to Illinois Lutheran High School? (Please explain)

- Has this child had any educational, behavioral, emotional, physical, or spiritual difficulty or concerns in school to this point in time? Yes No
- Has this child ever been retained in a grade? Yes No
- Has this child ever been suspended, expelled, or asked to voluntarily withdraw? Yes No
- Has this child had serious illness or injury? Yes No
- Does your child currently have or have they at some time had an I.E.P.? Yes No

If you answered yes to any of the above, please explain.

Do you, as parents, have an interest in receiving information about one of our congregations? Yes No

Have you had the opportunity to visit one of our church services? Yes No

Have you read our Student Handbook and agree to follow it? Yes No

Will you allow your child to become an adult member of the WELS through confirmation if he/she so desires? Yes No

Please make any other comments that will assist us in making the decision regarding entrance of this child into Illinois Lutheran Schools.

I have read and understand the procedures for application as listed on this form: Yes No

I affirm, to the best of my ability, all information on this form to be true and correct. If enrollment is granted, I will not in any way contradict, subvert, negate, or undermine the doctrines and teachings of Illinois Lutheran School, its faculty, staff, and students, or its supporting congregations, but will aid, support, help, and assist them in carrying out their duties. I also understand that enrolling in our school implies my agreement with all policies and procedures of our school.

Father/Guardian Signature: _____ Date: _____

Mother/Guardian Signature: _____ Date: _____

Office Use

Principal:

Recommended for enrollment: Yes No

Signature: _____ Date: _____

Church Membership status: Member (Trinity, Zion); Non-Member; Other Congregation: _____

Mission Prospect of: Trinity Zion

Registration fee amount paid: \$ _____ FACTS Account Opened: Yes No