



Application for Enrollment

Illinois Lutheran Schools

1610 Main Street, Crete, IL 60417 • 708.672.3262

448 Cass Street, Crete, IL 60417 • 708.672.5969

School Mission - *Illinois Lutheran provides a quality, Christian education to students of the Church and the community and the world by nurturing and reaching souls for time and eternity.*

Values - *Christ-Centered, Loving Family Culture, Safe and Nurturing Environment, Academic Excellence, Caring and Qualified Teachers and Staff*

Student Information

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

Date of Birth: ____/____/____

This child lives with: _____

Name all who have legal custody of this child: _____

Ethnic Origin: ☐ African American ☐ Caucasian ☐ Asian ☐ Hispanic ☐ Native American ☐ Two or more
(As required by the State of Illinois)

Parent/Guardian #1 Information

Legal Name: _____ Relationship to Student: _____

Address: _____

City, State & ZIP: _____ Phone: ____/____/____

Email: _____

Occupation: _____ Employer: _____

Name of church you currently attend and/or hold membership (if none, write "none"):

Parent/Guardian #2 Information

Legal Name: _____ Relationship to Student: _____

Address (if different from parent #1): _____

City, State & ZIP: _____ Phone: ____/____/____

Email: _____

Occupation: _____ Employer: _____

Name of church you currently attend and/or hold membership (if none, write "none"):

Previous School Attendance

Previous School Attended: _____

City and State of School: _____

Last grade completed: _____ Grade applying for : _____

Reason for leaving that school: _____

Other Children in the Family

Name	Age	Grade	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- Does your child currently have or have they at some time had a 504 Plan, individual education plan (IEP), individual service plan (ISP), behavior intervention plan (BIP) or any other special education plan? ☐ Yes ☐ No
- 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 that might impact their schooling? ☐ Yes ☐ No

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

- Do you have an interest in receiving information about one of our sponsoring churches? ☐ Yes ☐ No
- Have you read the ILS Student Handbook and agree to follow it? ☐ Yes ☐ No

Why do you wish to enroll your child in Illinois Lutheran Schools?

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

Non-discrimination policy: 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.

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.

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 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.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Office Use

Principal:

Recommended for enrollment: ☐ Yes ☐ No

Signature: _____ Date: _____

Church Membership status: _____

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