

2015-2016 TRANSFER APPLICATION

STUDENT'S NAME _____ SEX **M / F**
LAST FIRST MIDDLE
(CIRCLE ONE)

HOME ADDRESS _____ CITY _____ ZIP _____

TELEPHONE _____ DATE OF BIRTH _____ SS# _____

STUDENT'S CHURCH _____ PASTOR _____

LIST THE SCHOOLS YOU ATTENDED IN THE LAST 4 YEARS:

<u>SCHOOL</u>	<u>YEARS ATTENDED</u>
_____	_____
_____	_____
_____	_____
_____	_____

FATHER'S NAME _____ MOTHER'S NAME _____
(Guardian) FIRST LAST (Guardian) FIRST LAST

HOME ADDRESS _____ HOME ADDRESS _____

HOME CITY _____ ZIP _____ HOME CITY _____ ZIP _____

HOME PHONE _____ HOME PHONE _____

OCCUPATION _____ OCCUPATION _____

EMPLOYER _____ EMPLOYER _____

EMPLOYER ADDRESS _____ EMPLOYER ADDRESS _____

EMPLOYER PHONE _____ EMPLOYER PHONE _____

CELL PHONE _____ CELL PHONE _____

WORK PHONE _____ WORK PHONE _____

EMAIL _____ EMAIL _____

CHURCH _____ CHURCH _____



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DENOMINATION _____ DENOMINATION _____

SIBLING NAMES	BIRTHDATE	SIBLING NAMES	BIRTHDATE
_____	_____	_____	_____
_____	_____	_____	_____

STATUS OF PARENTS: STUDENT CURRENTLY LIVES WITH:

___ MARRIED ___ BOTH PARENTS

___ DIVORCED ___ MOTHER ONLY

___ SEPARATED ___ FATHER ONLY

___ DECEASED: MOTHER / FATHER ___ OTHER _____

RACE/ETHNICITY BACKGROUND (statistical purposes only):

Hispanic/Latino (Choose only one): Race (choose one or more, regardless of ethnicity):

___ No, not Hispanic/Latino ___ American Indian/Alaska Native

___ Yes, Hispanic/Latino ___ Black/African American

 ___ Native Hawaiian/Other Pacific Islander

 ___ Asian

 ___ White

- 1) Does the student have any physical handicaps which would hinder his/her participation in normal school routines? _____
- If Yes, explain _____ Does your student have an IEP? _____
- 2) Are there any problems concerning the student of which the school should be aware? _____
- If yes, explain _____
- 4) Has the applicant participated in a bilingual educational program? Yes / No (circle one)
- 5) Who has financial responsibility for the student?



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Name _____ Relationship _____

6) Does the student have any relation to a Luther North Alumni?

If yes: Name _____ Relationship _____

I hereby apply for admission into the following academy program:

_____ Open Academy

_____ Academy of Business

_____ Academy of Fine Arts

_____ Academy of Health Science

I hereby apply for admission to Luther North College Prep, knowing this is a Christian school and wishing to benefit from its Christian instruction. I agree to abide by all the regulations of the school.

Date _____
(Signature of Student)

I hereby consent to my child's enrollment at Luther North College Prep and shall endeavor to cooperate with the school. I also obligate myself to meet the charges for tuition and fees when due.

Date _____
(Signature of Parent)

This application should be returned to the Admissions Office.

Non-Discrimination Policy

Luther North College Prep admits students of any sex, race, color, national and 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 sex, race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.