



1025 14th Ave S
Fargo, ND 58103-4187

www.glsfargo.org
Susan Jahnke, Principal

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Grace Lutheran School is owned and operated by the Red River Lutheran School Association and a ministry of The Lutheran Church-Missouri Synod.

GRACE LUTHERAN SCHOOL NEW STUDENT APPLICATION

Pre-Kindergarten – 8th Grade

*Pre-Kindergarteners must be 4 by July 31.

Today's Date: _____

*Kindergarteners must be 5 by July 31.

Enrolling in Grade: _____

STUDENT INFORMATION

Student's Name: _____ Male _____ Female _____
 First Middle Last

Preferred Nickname: _____ Date of Birth: _____

Address: _____
 Street City State Zip Code

Ethnicity: _____

Has your child been baptized? Yes _____ No _____ Baptism Date or Month: _____

Public school your child would attend: _____

Preschool Attended (for incoming Pre-K and K, if applicable): _____

Previous School Attended: _____

Please describe your child's performance in school so far. _____

Are you happy with your child's education to this point? _____

Please describe any improvements you would like to see related to behavior and/or education.

Does your child have an IEP or receive special services? _____

If yes, please describe: _____

Has your child repeated a grade? _____ If yes, why? _____

Has your student experienced any discipline and/or conduct problems? _____ If yes, please describe. _____

Why do you wish to attend Grace Lutheran School? _____

Do you intend to send your child to Grace Lutheran School through 8th grade? _____

If no, please explain. _____

How did you hear about Grace Lutheran School? _____

PARENT INFORMATION

Father/Guardian Name: _____

Address: _____
Street City State Zip Code

Cell Phone Number: _____ Email: _____

Mother/Guardian Name: _____

Address: _____
Street City State Zip Code

Cell Phone Number: _____ Email: _____

Parents/Guardians are: Married _____ Separated _____ Divorced _____ Single Parent _____

Mother Not Living: _____ Father Not Living: _____

Mother Remarried: _____ Father Remarried: _____

Send correspondence to: Both Parents _____ Mother Only _____ Father Only _____

Tuition will be paid by: _____

If parents are separated or divorced, please describe the custody arrangement and any special circumstances. _____

Stepfather's Name (if applicable): _____

Address: _____
Street City State Zip Code

Cell Phone Number: _____ Email: _____

Stepmother's Name (if applicable): _____

Address: _____
Street City State Zip Code

Cell Phone Number: _____ Email: _____

FAMILY INFORMATION

Brothers/Sisters (including step-siblings)	Age
_____	_____
_____	_____
_____	_____

Church Membership: _____

Would you like to receive information about our Association churches? Yes _____ No _____

Are you a Thrivent member? _____

GRACE LUTHERAN SCHOOL'S STATEMENT OF BELIEFS

Grace Lutheran School is a ministry of the Lutheran Church – Missouri Synod and a member of the Red River Lutheran School Association, which includes Beautiful Savior Lutheran Church, Fargo, ND, Grace Lutheran Church, Fargo, ND, Immanuel Lutheran Church, Fargo, ND, Our Redeemer Lutheran Church, Moorhead, MN, St Andrew Lutheran Church, West Fargo, ND, and Trinity Lutheran Church, Sabin, MN.

We accept students from all faiths. We teach:

- that the Bible is God's inerrant and infallible Word, in which He reveals His Law and His Gospel of salvation in Jesus Christ.
- that the Father is the creator of all that exists, that Jesus Christ, the Son, became human to suffer and die for the sins of all humans and to rise to life again in the ultimate victory over death and Satan, and that the Holy Spirit creates faith through God's Word and the Sacraments. The three persons of the Trinity are coequal and coeternal, one God.
- that by Jesus' suffering and death as a substitute for all people of all time, He purchased and won forgiveness and eternal life for all who hear this Good News and believe it.

FINANCIAL RESPONSIBILITY

Please initial the following statement to show your agreement.

_____ I/we agree to pay my financial obligations to Grace Lutheran School through FACTS. I/we agree to contact Principal Susan Jahnke if my financial situation changes and I/we need to modify the payment plan.

_____ I/we understand that registration fees, if applicable, are non-refundable and not part of the yearly tuition cost.

_____ I/we understand that all financial arrangements, including financial aid and free and reduced lunch status, are kept confidential.

AGREEMENT TO TERMS

I/We the undersigned, do hereby certify that the information on this application is complete and factual. I/we acknowledge that the Grace Lutheran School Family Handbook is available online at www.glsfargo.org and accept and agree to follow the rules and policies as outlined in the handbook.

I/We the undersigned, understand that Grace Lutheran School uses continuous enrollment and that the student is considered permanently enrolled unless written notification of non-return is received by the stated deadline (usually mid-February). Notification of non-return after the stated deadline will result in forfeiture of the registration fee.

Parent/Guardian Signature: _____

Parent/Guardian Signature: _____

Printed Name of Person Filling Out This Application: _____

Grace Lutheran School admits students of any race, color, sex, national or ethnic origin to all rights, privileges, programs, and activities generally made available to students at the school. It does not discriminate on the basis of race, color, sex, national or ethnic origin in the administration of its educational policies, admission policies, financial aid programs, athletic programs, or other school-administered programs.