West Portal Lutheran School 200 Sloat Blvd. San Francisco, CA 94132 Sloat Campus 415-665-6330 Sunset Campus 415-731-3000 www.wplsf.com		
APPLYING FOR GRADE: SO	CHOOL YEAR:	
Student's Name: (Last)	(First) (Middle)	
Address: City: _	Zip:	
Date of Birth: / / Sex: [] Male [	] Female Birthplace:	
U.S. Citizen: [] Yes [] No	Ethnic Group:	
Date of Baptism: / / Baptismal Church:	City:	
FATHER	MOTHER	
Name:	Name:	
Address:	Address:	
City: Zip:	City: Zip:	
Occupation:	Occupation:	
Employer:	Employer:	
Home Phone: ()	Home Phone: ()	
Work Phone: ()	Work Phone: ()	
Cell Phone: ()	Cell Phone: ()	
Email:	Email:	
Ethnic Group:	Ethnic Group:	
West Portal Lutheran Member? [] Yes [] No West Portal Lutheran Member? [] Yes [] No		
Member of another church? [] Yes [] No	Member of another church? [] Yes [] No	
If yes, name of church:	If yes, name of church:	
Marital Status: [] Married [] Divorced [] Separated [] Single [] Widow/Widower If divorced, who has legal custody of the student? [] Father [] Mother [] Joint Please notify us if there are any problems regarding custodial care.		
Student Lives With: []Both Parents []Father []Moth	er [ ] Other	
Siblings: NameBirth date	West Portal Student?	
Name Birth date		
Primary Language(s) Spoken at Home:		
How did you hear about West Portal Lutheran School:		

	LAST SCHOOL ATTENDED
Name:	Grades Attended:
Address:	City/Zip:
Reason for	Leaving:

Ch	nildhood Development – Help Us Learn About Your Child	
Academic Strength?	Academic Weakness?	
Has your child ever been evaluated for: (If yes, please explain on a separate sheet.)		
[ ] [ ] Ho [ ] [ ] Si	YNearning Differences[][]Social Problemsearing Difficulties[][]Behavioral Problemspeech Difficulties[][]Psychiatric/Psychosocial Problemsisual Difficulties[][]I.Q.	
Are there additional health	n factors in your child's life (unusual accident, disability, serious illness, or serious allergies)?	
Does your child have any limitations which would hinder him/her from normal progress in the classroom?		
Have there been any situations in the student's life which the school should know about in order to meet his or her learning or developmental needs? (e.g. frequent moves, frequent changing of schools, divorce, etc.)		
Has the student ever been subject to major disciplinary action (suspension or expulsion) in school? [ ] Yes [ ] No (If yes, please explain on a separate sheet)		
Extracurricular interests, abilities, achievements, musical instruments played?		
Please list any other inforr	nation which you feel would be helpful:	
	ran School admits students of any race, color, nationality, and ethnic origin and does not administration of its educational policies, admission policies, or other school programs.	

The Faculty and Staff of West Portal Lutheran School are dedicated to providing the best education possible for your child. However, if the needs of your child cannot be met, we reserve the right to inform you of such at any time and to assist you in finding another educational environment within a specified

I hereby certify that the information on this application is accurate and complete and that inaccurate or incomplete information may result in non-acceptance or dismissal from school.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_

time frame.

Printed Name