CHRIST THE KING LUTHERAN SCHOOL

15600 Trenton Road, Southgate, MI 48195
Phone: 734-285-9697 Fax: 734-285-5275
email: admissions@ctk.me
website: www.ctkpanthers.com

New Student Enrollment Application Form

Check the appropriate grade level for this student:

☐ Kindergarten ☐ Grade 1 ☐ Grade 2 ☐ Grade 3 ☐ Grade 4
☐ Grade 5 ☐ Grade 6 ☐ Grade 7 ☐ Grade 8

Student's Full Name: _____
Last First Middle Preferred Name

Gender: ☐ Male or ☐ Female

Race: ☐ Hispanic/Latino of any race ☐ American Indian or Alaskan Native ☐ Asian ☐ White
☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ Two or more races

Date of Birth: _____ City/State or City/Country of Birth: _____

Date of Baptism (if applicable): _____ Church of Baptism: _____

Student's Present Church (if applicable): _____

STUDENT RESIDES WITH:

☐ Both parents at 1 residence (primary residence) ☐ Both parents at 2 residences (primary & secondary residence) ☐ Mother only ☐ Father only ☐ Other

Explain 'other' arrangements of guardianship or residence: _____

Student's Primary Residence: _____
street address city state zip code

Primary Residence phone: _____

Student's Secondary Residence: _____
street address city state zip code

Secondary Residence phone: _____

FATHER/MALE LEGAL GUARDIAN

Name: _____

email: _____

Place of Employment: _____

Occupation: _____

Work phone: _____ Cell: _____

Religious Affiliation: _____

Present Church: _____

Relationship to student:
☐ Father ☐ Stepparent Other: _____

Relationship to other parent/guardian:
☐ Married ☐ Divorced ☐ Separated ☐ Unmarried
Other: _____

MOTHER/FEMALE LEGAL GUARDIAN

Name: _____

email: _____

Place of Employment: _____

Occupation: _____

Work phone: _____ Cell: _____

Religious Affiliation: _____

Present Church: _____

Relationship to student:
☐ Mother ☐ Stepparent Other: _____

Relationship to other parent/guardian:
☐ Married ☐ Divorced ☐ Separated ☐ Unmarried
Other: _____

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Name of school your child is currently attending: _____

Has your child ever been suspended or expelled from school: ☐ YES or ☐ No

If yes, please explain: _____

Please list any academic, physical, emotional, or behavioral difficulties your child has: _____

_____

Is your child currently in speech or physical or occupational therapy: ☐ YES or ☐ No

If yes, what kind? _____

STUDENT'S BROTHERS AND SISTERS – please list names and date of birth:

_____/_____/_____ _____/_____/_____

_____/_____/_____ _____/_____/_____

_____/_____/_____ _____/_____/_____

_____/_____/_____ _____/_____/_____

ACCURACY AGREEMENT

I promise that all information provided to Christ The King Lutheran School is accurate and complete. (Any omissions or inaccuracies may result in removal of a student from CTK.) I show my agreement that I have provided accurate information by signing my name in the space below.

Parent/Guardian's Signature: _____ Date: _____

Name of person completing this application form: _____

Relationship to Student: _____

Policy of Nondiscrimination: Christ The King Lutheran School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. Christ The King Lutheran School does not discriminate on the basis of race, color, national or ethic origin in administration of its educational polices, admissions, polices, athletic and other school administrated programs.