



Zion Lutheran School Application 2019-2020

1244 E. Cypress Street · Anaheim, CA 92805 · www.zionanaheim.org · 714.535.3600 tel · 714. 254.7013 fax

Date _____ Grade Student Entering _____

GENERAL STUDENT INFORMATION

Student's Name _____ Male Female
Last First Middle

Address _____ City _____ Zip _____

Home Telephone () _____ Date of Birth _____ Date of Baptism _____

U.S. Citizen? Yes No Primary Language Spoken at Home _____

Ethnic Origin: White Hispanic Asian African-American Native-American Other _____

FAMILY INFORMATION

Father's Name _____

Mother's Name _____

Billing
Address _____
(if different from student)

Billing
Address _____
(if different from student)

City/Zip Code _____

City/Zip Code _____

Home Phone () _____
(if different from student)

Home Phone () _____
(if different from student)

Cell Phone () _____

Cell Phone () _____

Email Address _____

Email Address _____

Employer _____

Employer _____

Work Phone _____

Work Phone _____

This child is living with... Both Parents Father Only Mother only Father and Stepmother
 Mother and Stepfather Other (explain) _____

If divorced, who has legal custody of student? Father Mother Joint Custody

Are both natural parents living... Yes No Is this child adopted? Yes No

Please state any further legal restrictions that concern this student _____

SCHOOL HISTORY

Last School Attended _____
School Name Address Phone

Reason for leaving last school _____

May we contact them? _____ Yes _____ No

Has student repeated a grade? _____ If yes, which grade? _____

Has Student been dismissed, suspended, or disciplined at any school? _____ Yes _____ No

If yes, please explain _____

Has student received psychological testing? _____ Yes _____ No

If yes, explain _____

Please indicate any health and/or emotional concerns which the school should be aware _____

CHURCH HISTORY

Is Student baptized? Yes No Baptism Date _____

Church Member:

Zion Lutheran Church Member

Other Church Name: _____

Address: _____