



BETHLEHEM LUTHERAN
CHURCH • SCHOOL • PRESCHOOL

New Student Application Form
Bethlehem Lutheran School &
Bethlehem Little Stars Preschool

2777 Hermansau Rd
Saginaw, MI 48604
989-755-1144

Grade Level Applying For (PK3 - 8th Grade): _____ School Year for which you are applying: _____

(Full Name of Child (Last, First, Middle))			Male/ Female		Child's Date of Birth
Address (Number and Street, Building/Apartment Number)			City	State	Zip Code
Parent/Legal Guardian's Name		Home Phone ()	Parent/Legal Guardian's Name (Optional)		Home Phone ()
Home Address (if not child's address)		Cell Phone ()	Home Address (if not child's address)		Cell Phone ()
City	State	Zip Code	City	State	Zip Code
Email Address (Optional)			Email Address		
Employer Name		Work Phone ()	Employer Name		Work Phone ()

I do not have internet access, please mail information

Baptism/ Dedication Date _____

School last attended _____ Principal or contact person _____

Church Membership _____

Home Public School _____ County _____

How did you hear about us? _____

Does the student have special health needs? No Yes, Please explain. _____

Does the student have documented special learning needs? No Yes, please explain. _____

Does the student currently have an IEP or other formal Accommodation Plan? Yes NO

Is the student currently receiving Special Education services from another school? Yes No

An affirmation of Prior Discipline Record form must be returned with this application form in order for students to be considered for enrollment at Bethlehem Lutheran Schools

