



OAK GROVE LUTHERAN SCHOOL

OFFICE OF ADMISSIONS

Application Form for South Campus (K-5)

(To be completed by a parent)

Application for Grade _____ Date to Enter _____ Male _____ Female _____

Please print. When completed, return the application to Oak Grove Lutheran School's Admissions Office.

STUDENT INFORMATION

Student's Full Legal Name _____

Nickname _____ Birth Date _____ SSN _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Current Grade _____

Has applicant had an IEP or received special services within the last three years? ___ Yes ___ No

If yes, please explain _____

Name of case manager _____ Phone _____

Please provide a copy of the most recent **Evaluation Report and a copy of the IEP.**

An Oak Grove T-Shirt is given to all new students.

Please provide your child's T-Shirt size: XS S M L Child Size S M L XL Adult Size

Are you interested in the following programs?

___ Before-School Program ___ After-School Program ___ Transportation between campuses

How did you hear about Oak Grove Lutheran School? (Is there someone we can thank for recommending our school?) _____

Name _____ Phone _____

Address _____

FAMILY INFORMATION

Father/Guardian

Full Name: Mr./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Employer _____ Phone _____

Mother/Guardian

Full Name: Ms./Mrs./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Employer _____ Phone _____

Parents are:

___ Married ___ Separated ___ Divorced ___ Single Parent

___ Mother Deceased ___ Father Deceased ___ Mother Remarried ___ Father Remarried

With whom does the student live? Both Parents Mother Father Other _____

To whom should school correspondence be sent?

Both Parents Mother Only Father Only Other _____

Tuition will be paid by: Both Parents Father ___% Mother ___% Other _____

Do you qualify for any of the following discounts?

_____ Sibling _____ ELCA Pastor _____ Concordia College _____ Oak Grove Employee

Step-parent (if applicable)

Full Name: Mr./Mrs./Ms./Dr./Rev. _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Employer _____ Phone _____

Brothers/Sisters

Name	M/F	Birthdate	Grade in School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Members of immediate family attending or who have attended Oak Grove:

Grandparents

Name _____	Name _____
Address _____	Address _____
_____	_____
Phone _____	Phone _____

Church Information

Church Family Attends _____

Denomination _____ Are you a member? _____

Address _____

Oak Grove Lutheran School's Philosophy of Behavior, Discipline, and Conflict Resolution

Oak Grove has adopted ***Respect and Protect*** as the institutional discipline policy. This is a disciplinary practice that is relational at its very core. It is a policy of restorative interventions versus punitive consequences.

The overarching goal of ***Respect and Protect*** is to make Oak Grove a safe, supportive place highly conducive to learning for all students.

Respect and Protect upholds the ideal that every child and adult has the right to feel respected and protected in school. Everyone is responsible to respect and protect the rights of others. Oak Grove is committed to teaching a culture of respect and care for one another. We practice a "No Tolerance" attitude towards violence and disrespect. Violence and/or Disrespect would be defined as ***any mean word, look, sign, or act that hurts or threatens to hurt a person's body, feelings, reputation, or things.***

Oak Grove reserves the right to interpret the behavior and intent of a student. If the student's behavior and/or attitude consistently fail to reflect the ***Respect and Protect*** philosophy, appropriate actions will be taken, in accordance with our policies.

Successful academic and social aptitude is a partnership of school and home. A full disclosure of our policy can be found in the office.

STUDENT STATEMENTS

1. What activities do you enjoy in or outside of school?

2. What does Jesus' love mean to you?

PARENT STATEMENTS

1. Describe your child's personal strengths (academic, spiritual, social, physical).

2. Describe your child's personal weaknesses (academic, spiritual, social, physical).

3. Has your child ever been the subject of any major disciplinary action? ___ Yes ___ No
If yes, please explain the circumstances.

4. Why is Oak Grove Lutheran School a good choice for your child?

- I have read and agree with the educational philosophy and mission of Oak Grove Lutheran School.
- The information I have provided is both true and accurate

Signature _____ Date _____

CHECK LIST FOR APPLICATION PROCESS

Please check to make sure the application is complete. The application process **will begin** when the Admissions Office has received **ALL** of the following information:

- _____ The fully completed APPLICATION
- _____ A certified copy of the student's BIRTH CERTIFICATE (*Kindergarten entrants only*)
- _____ A copy of the applicant's most recent IMMUNIZATION FORM
- _____ A copy of the applicant's most recent REPORT CARD and TRANSCRIPT
- _____ A copy of the applicant's most recent STATE ASSESSMENT/STANDARDIZED TESTING
- _____ The non-refundable APPLICATION FEE of \$50

** Please note: Oak Grove must receive the student's permanent file prior to the student attending class.*

Oak Grove Lutheran School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs, athletic and other school-administered programs.

The mission of Oak Grove Lutheran School is to express God's love by nurturing students for academic achievement, lifelong Christian commitment and loving service throughout the world.



OAK GROVE LUTHERAN SCHOOL

RECORDS RELEASE

Grades K-5

2720 32nd Avenue South
Fargo, North Dakota 58103
701.893.3073
FAX 701.893.3076
www.oakgrovelutheran.com

PARENTAL PERMISSION FOR RELEASE OF STUDENT RECORDS

TO THE PARENT/GUARDIAN:

Please complete this form and return it to Oak Grove Admissions.

The Admissions Office will send the Records Release form to your child's current school once they have been accepted.

Student Name _____ Current Grade _____

Student SSN _____ Birthdate _____

Current School _____

Principal, Director or Guidance Counselor _____

School Address _____

Street

City

State

ZIP

School Phone _____ School FAX _____

I/We give permission for the release of my child's records to Oak Grove Lutheran School. I release the school and every person from any and all liability resulting from or pertaining to the furnishing of records, documents and other information provided to Oak Grove. I understand that the information will become the confidential property of Oak Grove Lutheran School.

Signature of Parent or Guardian

Date

TO THE SCHOOL PRINCIPAL, DIRECTOR OR GUIDANCE COUNSELOR:

The above named student has applied and been accepted for admission to Oak Grove Lutheran School. Please send the student's entire school record, to the address listed below. Thank you very much.

Registrar
Oak Grove Lutheran School
2720 32nd Avenue South
Fargo ND 58103