

# Shepherd of the Coast Lutheran School

2023 - 2024 Enrollment Application



Shepherd of the Coast Lutheran Church and School

1901 East Commercial Boulevard + Fort Lauderdale, Florida 33308

[www.sotcfl.org](http://www.sotcfl.org)

PHONE: 954.772.5468 + FAX: 954.772.2232

## Enrollment Procedure for New Students Applying for Admission

Shepherd of the Coast Lutheran School affords students of any race, color, national and ethnic origin 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 or national and ethnic origin in the administration of its educational policies, scholarship, athletic and other school administered programs.

Information and registration forms may be obtained from the office. The following items should accompany the Enrollment Application:

1. Application Fee
2. Copy of Birth Certificate
3. Florida Immunization Certificate – Florida Department of Health Form #680
4. School Entry Health Form – Florida Department of Health Form #3040
5. Last report card (Grades 1-8)
6. Last Achievement Test Results
7. Two (2) recommendation forms from current or former teachers and/or administrators (Grades 6-8)
8. Results from the Shepherd of the Coast Placement Test (QUIC Inventory)

Before admission, families need to schedule an interview with administration. The administrator will need all academic information prior to this interview including, a copy of the last report card, the last achievement test results, the result of the Shepherd of the Coast admissions test, and the complete current Individual Education Plan (IEP, if available). If the child is in grades 4-8, he or she will also need to be present at the interview. Students entering grades 4 – 8 will also need two completed recommendation forms from current or former teachers and/or administrators prior to admission. It is best that we receive these forms prior to the interview.

Children who, in the opinion of the principal and teacher, are not academically or developmentally ready to enter Kindergarten or First Grade may be requested to wait an additional year before admission to Kindergarten or First grade. Note that students enrolling in Kindergarten must reach their fifth birthday on or before September 1<sup>st</sup>. Students enrolling in Pre-Kindergarten must reach their fourth birthday on or before September 1<sup>st</sup>.

### **Student Admission**

Once all the information has been received a decision will be made regarding admission to Shepherd of the Coast Lutheran School. The administrative office will inform the parent(s) of its decision when a student is accepted to the school. The Tuition Agreement should then be completed and registration fees need to be paid in full within two weeks of acceptance in order to hold the student's place for the fall.

Note that all new students are on a probationary period for the first quarter of their attendance. If there is any unacceptable behavior or attendance issues (see disciplinary process in the Parent/Student Handbook) during the probationary period he/she will be removed from the school's roster.

Shepherd of the Coast Lutheran School and Early Childhood Center admits students of any race, color, or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at our school. We do not discriminate on the basis of race, color, national or ethnic origin in the administration of our educational policies and other school-administered programs.

Shepherd of the Coast Lutheran School and Early Childhood Center is a ministry of Shepherd of the Coast Lutheran Church. Shepherd of the Coast Lutheran Church is a member of the Lutheran Church-Missouri Synod. The students are from our congregation, other churches, and from families that have no church affiliation.

Applicant's Legal Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Nickname \_\_\_\_\_

Entering Grade: K 1 2 3 4 5 6 7 8 (circle one)

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City Zip

Parent's Marital Status: Married Widowed Separated Divorced Single Child Custody: Mother Father Joint Other: \_\_\_\_\_  
(Circle) (Circle)

Email Address \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Mother's Work Number \_\_\_\_\_ Father's Work Number \_\_\_\_\_

Mother's Cell Number \_\_\_\_\_ Father's Cell Number \_\_\_\_\_

Mother's occupation is \_\_\_\_\_ Father's occupation is \_\_\_\_\_

Names of Brothers and Sisters \_\_\_\_\_ (age) \_\_\_\_\_ (age)

Church Affiliation: Mother \_\_\_\_\_ Father \_\_\_\_\_ Student \_\_\_\_\_

Does the family attend church? Yes No Sometimes (Circle)

Does the child take any medication on a regular basis? No Yes Name of medication \_\_\_\_\_  
(Circle)

Are there any restrictions which would limit or exclude your child's full participation in physical education class? No Yes  
(Circle)

If yes, explain: \_\_\_\_\_

Does the student have any learning disabilities (diagnosed)? No Yes If yes, explain \_\_\_\_\_  
(Circle)

Has the applicant ever failed or repeated a grade? No Yes  
(Circle)

Has the applicant ever been suspended, expelled, or asked to withdraw from a previous school? No Yes  
(Circle)

Will the family be using the John D. McKay Scholarship to assist with tuition? No Yes  
(Circle)

Student's Last School Attended: \_\_\_\_\_

Address City State Zip

To the best of my knowledge the above information is accurate and true

Signed \_\_\_\_\_  
(Signature of mother or guardian) (Signature of father or guardian)

Date \_\_\_\_\_