



ALSalaska.org
8100 Arctic Blvd.
Anchorage, AK 99518
Phone (907) 522-3636
Fax (907) 522-3359

APPLICATION FOR ADMISSION

| Preschool/Childcare | | K-6 Child Watch | Grade |
|----------------------------------|------------------------------------|---|---|
| <input type="checkbox"/> Mon-Fri | <input type="checkbox"/> Full Days | <input type="checkbox"/> Before School | <input type="checkbox"/> Kindergarten |
| <input type="checkbox"/> M, W, F | <input type="checkbox"/> Part Days | <input type="checkbox"/> After School | <input type="checkbox"/> 1 <input type="checkbox"/> 5 |
| <input type="checkbox"/> T, Th | | <input type="checkbox"/> Summer - Full Time | <input type="checkbox"/> 2 <input type="checkbox"/> 6 |
| | | <input type="checkbox"/> Summer - Part Time | <input type="checkbox"/> 3 <input type="checkbox"/> 7 |
| | | | <input type="checkbox"/> 4 <input type="checkbox"/> 8 |

**NOTE: YOUR REGISTRATION FEE MUST ACCOMPANY THIS FORM.
THIS FEE IS NON-REFUNDABLE.**

CHILD'S Last Name _____ First _____ Middle _____
 Home Address: _____
Street City Zip
 Date of Birth: ____ / ____ / ____ Place of Birth: _____ Gender: M F
 Is Child Baptized: Y N If yes, date: _____ Church Now Attending: _____
 Most Recent School: _____

PARENTS' Status Married Separated Divorced Single Parent Other _____
 CHILD Lives With Both Parents Mother & Stepfather Father & Stepmother Joint Custody
 Mother Only Father Only Other: _____ Legally Adopted
 Names and ages of siblings living in the home: _____
 Names and relation to child of other adults living in the home: _____

MOTHER'S Last Name _____ First _____ Email _____
 Home Address (if different than child): _____
 Mailing Address (if different than home): _____
 Phone: Cell _____ Text OK Home _____ Work _____
 Occupation: _____ Employer: _____
If remarried, Current Spouse's Name _____ Cell _____

FATHER'S Last Name _____ First _____ Email _____
 Home Address (if different than child): _____
 Mailing Address (if different than home): _____
 Phone: Cell _____ Text OK Home _____ Work _____
 Occupation: _____ Employer: _____
If remarried, Current Spouse's Name _____ Cell _____

For Office Use Only

| | | | |
|--------------------|----------------------|---|------------------------------|
| Received by: _____ | Date Received: _____ | Registration Paid <input type="checkbox"/> Cr/D Card <input type="checkbox"/> Ck/Cash | Desired Start (Mo/Yr): _____ |
|--------------------|----------------------|---|------------------------------|

If there is information of which the school should be made aware concerning an individual who is not to be in contact or picking up your child (i.e. custody issues), please indicate that information below, and **attach legal documentation**.

Name: _____ Relationship to Child: _____

Reason: _____

.....
Emergency contacts and other adults authorized to pick up your child will be submitted on a separate form upon acceptance.

--- Please Complete the Questions Below ---

How did you learn about our school? (Please check as many ways as applicable.)

- Online/Website Radio Mailing Open House Facebook Instagram Other: _____
 Word-of-Mouth Recommendation; Whom may we thank? _____

What has motivated you to enroll your child in Anchor Lutheran School? What goals do you have for your child? Please be specific.

Describe your child's social skills and his/her ability to relate to other children and adults:

Please indicate any circumstances that continue to impact school achievement or activity of your child (i.e. extensive travel, illness, grades repeated, diagnosed learning differences):

Does your child have any health or physical limitations? **Y N** If yes, explain fully:

Has the applicant ever been suspended or expelled from school? **Y N** If yes, share when and briefly explain the circumstances:

Ethnicity of child (optional, used only for statistical reporting):

- African American AK Native American Indian Asian Caucasian Hispanic Other: _____

Please initial to acknowledge and accept each of the statements below:

- Anchor Lutheran School welcomes all applicants and admits students of any gender, race, color, national or ethnic origin, age, or disability 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 gender, color, race, national or ethnic origin, age, or disability in the administration of our educational policies, scholarship and financial aid programs, or athletic and other school-administered programs. _____ (Initials)
- The Alaska Office of Children's Services has the authority to interview children or staff, and to inspect and audit records regarding your child, without prior consent. _____ (Initials)
- Consent is given to ALS to use images/video of my child for release to the newspaper for stories about the school, for other media releases, posting on bulletin boards, school promotional purposes, etc. _____ (Initials)

By signing, I agree to the policies and procedures in the Parent Handbook.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____



FINANCIAL AGREEMENT

| | | |
|---|--|---|
| Student(s) Name(s): | | |
| <input type="checkbox"/> Preschool/Childcare | <input type="checkbox"/> K-6 Child Watch | <input type="checkbox"/> Summer Program |
| Grade(s): <input type="checkbox"/> Kindergarten <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 | | |
| - PLEASE CHECK ALL THAT APPLY - | | |

ALL PROGRAMS:

I/we understand that the Lutheran School Association of Anchorage (LSAA) through Anchor Lutheran School will provide its full range of classroom, educational, religious, and/or Child Watch programs to my child(ren).

I/we agree to pay fees for Tuition, Childcare, Child Watch, and any miscellaneous amounts owing, including late payment charges for past due accounts in the amounts as specified by the school. Miscellaneous fees (field trips, hot lunch charges, milk, apparel, athletics, etc.) will be billed as accrued.

PAYMENTS: Monthly Tuition Payments, anticipated Childcare or Child Watch fees, and any accrued miscellaneous fees are **due prior to or on the first day of each month**. Accounts not paid in full by the **15th** of each month are considered past due and will be assessed a **late fee of \$25 per month**. If you are not able to meet your financial obligation, either temporarily or indefinitely, immediately discuss the matter with the School Administrator. Any past due account may be subject to denial of service. Please note, we accept DCA, OCS, and most other financial assistance programs.

METHODS OF PAYMENT: Anchor accepts cash, check, debit or credit cards (Visa, MasterCard, and Discover). Credit card auto-pay authorization forms are available in the office. If the office is closed, payments may be placed in the lock box located inside the main entryway of the Lutheran Center.

EFFECTIVE DATES: Fees here listed are effective as of February 1, 2018. Program fees are subject to change with a 30-day written notice.

PRESCHOOL/CHILDCARE - CHILD WATCH - SUMMER PROGRAM:

REGISTRATION: \$60 One-time Registration Fee payable upon submitting application.

USAGE FEES (paid in advance of use): Monthly Rate: \$890 Daily Rate: \$55 Hourly Rate: \$6.60

USAGE FORMS: Required monthly if selecting Daily or Hourly Rate. Due by the 15th of the prior month.

ABSENCE: Please Notify Anchor Lutheran School Office by 9:00am if your child will be absent.

CANCELLATION POLICY: A **two-week notice** is required to avoid being charged for usage already committed.

LATE PICK-UP FEES: There is a \$1.00 charge **for each minute** after 6:00pm.

BEFORE/AFTER SCHOOL: Morning Child Watch is billed until 9:00am. Afternoon Child Watch billing begins at 3:30pm. A minimum of one half-hour is charged for each use.

CAMPBELL BUS STUDENTS: Notify Anchor Lutheran School Office by Noon if your child will not be riding the afternoon bus as scheduled. Non-notification may result in termination of enrollment in the ALS Child Watch Program.

KINDERGARTEN-8th GRADE:

REGISTRATION FEE: \$350 annual registration applies to both Early and Standard Tuition Rates and is payable upon submitting enrollment/re-enrollment paperwork.

| OPTION | ANNUAL TUITION | MONTHLY PAYMENT June-May | Select: |
|-------------------------------------|----------------|-----------------------------|--------------------------|
| Early (enrolled by May 15, 2018) | \$8,455* | \$705/month | <input type="checkbox"/> |
| Standard | \$8,995* | \$750/month | <input type="checkbox"/> |

*Subject to financial assistance adjustment. See details below.

FAMILIES IN PARTNERSHIP: Each family must complete 20 hours of Families in Partnership service. Each hour not contributed will be charged to the family's account at a rate of \$25 per hour. We strongly prefer your service over your money, so please see and keep the details attached for guidance.

CHILD WATCH: Your child will be automatically signed into Child Watch if they are unattended earlier than 8:45 a.m. and/or after 3:45 p.m. (or noon on minimum days). Your account will be billed accordingly for usage. A minimum of one half-hour charge is assessed for each use. Anticipated usage fees are to be paid in advance.

FINANCIAL AID: Financial aid is available to all Kindergarten-8th Grade qualifying families. Details are available on our school website and in the school office. Apply online through our website at http://www.alsalaska.org/financial_aid.html. Application for Financial Aid must be made within 60 days of enrollment and accounts may only be adjusted for up to 60 days preceding the Finance Committee's approval. All accounts under review for Financial Aid, must make minimum 50% payment of balance due to remain current.

PAYMENTS: First tuition payment is due June 1, 2018, with last payment due May 1, 2019.

TUITION CHARGE / REFUND POLICY:

When a student is enrolled or withdrawn from the school later than June, the tuition rate charged / remaining liability will be determined by applying the appropriate percentage of tuition, as shown.

| Month of Entry or Withdrawal | % Charged for Entering Student | % Liability for Student Withdrawn |
|------------------------------|--------------------------------|-----------------------------------|
| JULY | 100% | 5% |
| AUGUST | 100% | 10% |
| SEPTEMBER | 100% | 20% |
| OCTOBER | 80% | 30% |
| NOVEMBER | 70% | 40% |
| DECEMBER | 60% | 50% |
| JANUARY | 50% | 60% |
| FEBRUARY | 40% | 70% |
| MARCH-MAY | 30% | 100% |

By signing, I/we understand and agree to the terms listed above and the policies and procedures in the Parent Handbook.

Signature: _____ Date: _____

AK Driver's License #: _____ - **OR** - Social Security #: _____

Signature: _____ Date: _____

AK Driver's License #: _____ - **OR** - Social Security #: _____

(For two parent households, signatures and information for both must be provided.)



Kindergarten - 8th Grade **FAMILIES IN PARTNERSHIP** ("FIP" Program)

At Anchor Lutheran, we see the **Families in Partnership** Program as an investment of time and talent to promote the mission and ministry of Anchor Lutheran School. We also see the FIP Program as a means to further emphasize to our students the importance and value of service, as they see their parents, the most significant role models in their lives, taking the time to contribute their own service hours in order to help our school be the best place possible for students.

There are two primary reasons for a partnership program. The first is to intentionally involve parents in the lives of their children and their activities, particularly at their school. The second is to help the school improve its endeavors in the areas of instruction, teacher assistance, extracurricular offerings, building maintenance, and community service. We can do **more** together in partnership than on our own.

Each family has a commitment to fulfill 20 hours of service per school year. Just about anything that meets the mission and ministry of the school qualifies for FIP hours. Some examples include: chaperoning a field trip; hot lunch service; participating in fundraising activities; attending Parent Council meetings; coaching; building maintenance projects; preparation for evening fellowship events; mailings; helping in the classroom or other areas around the school. These are just some ideas to consider, as there are many other ways to offer your time and talents. If you have any questions about how you may fulfill your partnership hours, please contact the School Office Staff.

Special Opportunity: FIP hours may also be fulfilled through a special service to the school – recommending Anchor Lutheran to new families! When a new family enrolls at Anchor Lutheran upon your referral, and is accepted, you will be given credit for all 20 FIP hours. It is a **joy** to give out such referral FIP credits, especially as people who effectively refer others to our school are often among our most active volunteers. The more you are involved at Anchor, the more you come to want to share the experience with others.

Partnership hours may be worked between June and May of the corresponding school year. They do not carry over from one year to another. Parents, grandparents, and other relatives may all contribute these hours on behalf of the family. The hours are per family, not per student in the family. Parents are asked to keep track of their hours on their respective log sheets located in the office. The office staff will then tabulate the hours and credit respective accounts for the hours worked. If a family does not complete the required 20 hours of service, each hour not contributed will be charged to the family's account at a rate of \$25 per hour. **We strongly prefer your service over your money**, so please let us know if you need help finding ways to contribute your 20 hours.