



**Linda Vista Adventist Elementary School**  
 "Where children grow closer to God while learning to master the world"

**Part-Time Student Enrollment Addendum**  
**2025 - 2026**

| STUDENT/PARENT (GUARDIAN) INFORMATION   |  |        |                      |           |          |        |
|---|--|--------|----------------------|-----------|----------|--------|
| Student's Last Name   |  |        | Student's First Name |           |          |        |
| Name and address of school where student is primarily enrolled.   |  |        |                      |           |          |        |
| Select the blocks for which you would like to enroll your child.  |  |        |                      |           |          |        |
|   |  | Monday | Tuesday              | Wednesday | Thursday | Friday |
| 8:15-12:00  |  |        |                      |           |          |        |
| 11:30-3:15  |  |        |                      |           |          |        |
| Any special considerations that we should know about your child?<br><br>(For example, special schedule considerations, educational focus, special gifts, interests, etc.) |  |        |                      |           |          |        |

X \_\_\_\_\_  
**Father's/Guardian's Signature**

X \_\_\_\_\_  
**Mother's/Guardian's Signature**