

Application date _____
 Applying for grade _____
 Academy year _____



Office use only

Date _____
 App. fee pd _____
 Reg. fee _____
 Resource fee _____
 Interview _____
 Orientation _____

LAKE CHRISTIAN ACADEMY APPLICATION FOR ENROLLMENT

STUDENT INFORMATION

Please print legibly

Name _____ Email _____

(Last) (First) (Middle initial)

Address: _____ City _____ Zip _____

Parent Telephone (preferred): _____ secondary: _____

DOB: _____ Age: _____ Gender: M F

Last school attended: _____ Last grade completed: _____

Contact number of prior or current school: _____

FAMILY INFORMATION

Father/Guardian _____

Address: _____ City _____ Zip _____

Employer _____ Position _____ Work phone _____

Mother/Guardian _____

Address: _____ City _____ Zip _____

Employer _____ Position _____ Work Phone _____

Emergency telephone number other than those already listed _____

Marital status ___ Married ___ Divorced ___ Remarried ___ Separated ___ Widow(er) ___ Single

If divorced, who has legal custody? _____ (please provide copy of legal custody document)

Please list all siblings currently living in the home

_____ Age _____
_____ Age _____
_____ Age _____
_____ Age _____

Please indicate academic level of student's previous work: ___Excellent ___ Good ___Average ___Poor

Please select all that apply: ___Discipline Issues ___ Learning disabilities ___ IEP ___ Repeated grades

Does the applicant have any mental, emotional or physical handicaps that may affect his/her activities or progress that should be known? If yes, please explain

MEDICAL INFORMATION

Does your child have any physical disabilities or allergies? If yes please explain _____

Are there any diagnosed learning disabilities? If yes, please explain _____

Is the student on any medications? ___Yes ___No If yes, please list medications (provide a separate medical plan if necessary) _____

FINANCIAL INFORMATION

Lake Christian Academy is tuition driven, its basic program dependent entirely upon student tuition and fees. Therefore, a financial commitment must be made for acceptance into the school. Tuition is due on the 1st of every month, with payment considered to be late on the 5th and a late fee applied at the rate of \$25. If any account is 2 months behind, the student will not be allowed to attend class until payment is made.

REFERENCES

Please give three (3) references. Please include a former school teacher if possible

| | | |
|--------|---------|---------|
| (Name) | (email) | (Phone) |
| (Name) | (email) | (Phone) |
| (Name) | (email) | (Phone) |

RELIGIOUS INFORMATION

Church Attending: _____ Pastor: _____

Phone: _____ Email: _____

Please check here if you do not attend church _____

Please check the appropriate answers:

Father, born-again Christian ___yes ___no Mother, born-again Christian ___yes ___no

Has applicant (student) ever made a profession of faith in Christ? ___yes ___no

Family Church Attendance: ___Regular ___Occasional ___Seldom ___Never

*The above answers do not necessarily qualify or disqualify the student's acceptance to LCA.

We request that you consider the following questions and respond to them for our mutual understanding:

1. How do you provide spiritual training for your children?

 2. How do you provide discipline in the home?

 3. What are your reasons for wanting to enroll your children in Lake Christian Academy?

 4. Do you believe that parents have a role in their child's education or do you believe it is the sole responsibility of the school? If you feel you have a role, please rate the percentage you feel is appropriate. Please explain your answer.
-

CERTIFICATION OF INFORMATION

We hereby certify that the above answers are true and are made with no reservations beyond those in the attached explanations.

Date: _____

Father/Guardian Signature: _____

Date: _____

Mother/Guardian Signature: _____