



Student Enrollment Application

Please Read Carefully

*“Train a child in the way he should go and when he is old he
will not turn from it –Proverbs 22:6 NIV*

STUDENT INFORMATION



Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone #: (____) _____ - _____ Cell Phone #: (____) _____ - _____
Age: ____ Gender (M/F): ____ Birth Date: __/__/____ Birthplace: _____
School Last Attended: _____
School Address: _____

Last Grade Completed: ____ . Comments: _____

FAMILY INFORMATION



Father's Name: _____
Employment: _____ Position: _____
e-mail: _____ Business Phone: (____) _____ - _____
Mother's Name: _____
Employment: _____ Position: _____
e-mail: _____ Business Phone: (____) _____ - _____
Other Emergency Telephone Number: (____) _____ - _____
Marital Status: (✓) Married: ____ Widow: ____
Divorced: ____ Separated: ____
Children in family of school age if not applying:
Name: _____ Age: _____
Name: _____ Age: _____
Name: _____ Age: _____
Reason they are not applying: _____

RELIGIOUS INFORMATION



Church Attending: _____
Address: _____
Pastor: _____ Phone: (____) _____ - _____
Is applicant's Father Christian? (Y/N): ____ Is applicant's Mother Christian? (Y/N): ____
Has applicant ever made a profession of faith in Christ? (Y/N): ____
Prior Church (if any): _____ City: _____ St: _____

MEDICAL INFORMATION



Family Physician: _____

Phone: (____) _____ - _____

Does applicant have any physical defects or allergies? (Yes/No): _____

If so, Explain: _____

Has applicant received immunizations? DTP/DTaP/DT/Td _____

Polio: _____ MMR: _____

Varicella: _____ Hepatitis B: _____

SCHOLASTIC INFORMATION



Has student ever been expelled, dismissed, suspended, or refused admission to another school? (Yes/No): _____

If yes, explain: _____

Has student ever had disciplinary difficulty at school? (Yes/No): _____

If yes, detail: _____

Does student have a juvenile or arrest record? (Yes/No): _____

If yes, explain: _____

Has student ever used tobacco or nonprescription drugs of any kind? (Yes/No): _____

If yes, explain: _____

Please indicate academic level of student's previous work: (✓)

Excellent: ___ Good: ___ Average: ___ Poor: ___

Has student ever failed an academic subject in school? (Yes/No): _____

If yes, explain: _____

GENERAL INFORMATION



How did you hear about this school? _____

Reason for selecting this school: _____

Application must be filled out completely before it can be processed. The \$100 application, registration, and testing fees must accompany this application and are non-refundable. An interview with attendance from both the parents and the student will be required before final acceptance and enrollment.



For your convenience in meeting your financial obligations, tuition is divided into _____ installments. The first payment is due on or before _____; the final payment is due by _____, before the final progress reports are mailed at the end of the school year.

“I hereby pledge to pay my financial obligations to the school on the due date and understand that it may be necessary to withdraw my student if proper arrangements are not made on a past due account.”

“I give permission for my student to take part in all school activities including sports and school-sponsored trips away from the school premises, and absolve the school from liability to me or my student because of any injury to my student at school or during any school activity.”

“I agree to uphold and support the high academic standard of Light of Faith Christian Academy by providing a place at home for my student to study and giving my student encouragement in the completion of any homework assignments.”

“I appreciate the standards of Light of Faith Christian Academy and do not tolerate profanity, obscenity in word or action, dishonor to the Godhead and the Word of God, or disrespect to the personnel of LFCA. I hereby agree to support all regulations of the school in the applicant’s behalf and authorize this academy to employ discipline as it deems wise and expedient for the training of my student.”

“I understand that Light of Faith Christian Academy reserves the right to dismiss any student who fails to comply with the established regulations and discipline or whose financial obligation remains unpaid.”

“I have read the Light of Faith Christian Academy *Student Handbook*, agreed to complete Parent orientation and Parent Orientation PACEs that may accompany this orientation; I understand the terms stated on this Application and agree thereto.”

Signature of Father: _____ Date: ___/___/___

Signature of Mother: _____ Date: ___/___/___