

L.W.C.S. Student Reenrollment Application

School Term: 20 _____

Date : _____

Student Information

Name _____
[Last] [First] [Middle]

Primary Residence _____

City _____ Zip _____ Telephone _____

Age _____ Last Grade Completed _____

Address _____

Student Social Security # _____

Circle if Applicable: Parents Married / Parents Separated / Parents Divorced / Father Deceased / Mother Deceased

If divorced, who has primary custody? _____ A copy of custody papers must be on file.

Student resides with (Check all): Father Mother Stepfather Stepmother Guardian Grandparents

Family Information

Father's Name _____

Employment _____

Position _____ Business Phone _____

Social Security # _____

Mother's Name _____

Employment _____

Position _____ Business Phone _____

Social Security # _____

Emergency Telephone Number other than those already listed _____

Email for School Updates: _____

Please provide the following information on the parent **not living** with the child:

Full Name: _____ Spouse's Name: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Occupation/Firm Name: _____ Email Address: _____

Please send: No Mailings All Mailings and Email Communications

List of other people permitted to pick up your child:

Name: _____

Name: _____

Name: _____

Name: _____

Religious Information
(Optional for Scholarship Parents)

Church Attending : _____

Address: _____

Pastor _____ Phone _____

Father: Christian? Yes _____ No _____

Mother: Christian? Yes _____ No _____

Has applicant even made a profession of faith in Christ? Yes _____ No _____

Medical Information

Family Physician _____ Phone _____

Does student have any physical defects or allergies? _____

Explain _____

Has student received necessary immunizations? Yes _____ No _____

Will medication need to be dispensed at school on a daily basis? Yes _____ No _____

If yes please provide Medical Permission Form and daily medication dispenser.

How could this medicine affect your child in the classroom? _____

Does applicant have a life-threatening allergy? ()No ()Yes

Explain _____

Extended Care

Will you need to drop your child off between 6:30 a.m. and 8:00 a.m.? No () Yes () What time? _____

Will you need to pick your child up between 3:30 p.m. and 6:00 p.m.? No () Yes () What time? _____

Application, Registration and Testing Fee of \$150.00 must accompany Application and are not refundable.
[Registration and Testing Fee are included for students that have scholarships.]

For your convenience in meeting your financial obligations, tuition is divided into monthly installments.

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY:

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

“I will follow the school's dress code and grooming standards precisely as set forth in the Handbook for Parents and Students.” (Available online)

“If my child participates in a scholarship program I agree to endorse the checks within 48 hours of being informed they are available.”

“ I give permission for my child to participate 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 the school by providing a place at home for my student to study and giving my student encouragement in the completion of any homework or assignments.”

“ I appreciate the standards of the school 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 the school. I hereby agree to support all regulations in the applicant’s behalf and authorize this school to employ discipline as it deems wise and expedient for the training of my child.”

“ I understand that the school 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 or will read the Parent Handbook with my child and will contact the administration with any questions we may have.”

“I will take responsibility and make restitution for any damage done to school property by my child.”

My child’s picture _____ may _____ may not (check one) appear on the website, brochures, newsletters, or other promotional material.

Signature of Father

Date

Signature of Mother

Date