



1450 Citrus Oaks Avenue · Gotha, FL · 34734  
[www.mylcac.com](http://www.mylcac.com)

## Student Application

Date: \_\_\_\_\_

School Year: **2024-2025**

Grade Entering: \_\_\_\_\_

### Student Information

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Family/Parent Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Race/Ethnicity: \_\_\_\_\_ Last Grade

Completed: \_\_\_\_\_ School Last Attended: \_\_\_\_\_ Phone Number:

\_\_\_\_\_ School Address: \_\_\_\_\_

### Family Information

Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Marital Status: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widow/Widower \_\_\_\_\_

Children in family of school age if not applying:

Name \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason they are not applying: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

### Religious Information

Church Attending: \_\_\_\_\_ Pastor: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Father: Christian? Yes \_\_\_\_\_ No \_\_\_\_\_ Mother: Christian? Yes \_\_\_\_\_ No \_\_\_\_\_

Has the student ever made a profession of faith in Christ? Yes \_\_\_\_\_ No \_\_\_\_\_

(Over)

**Medical Information**

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Student's Physician \_\_\_\_\_ Phone: \_\_\_\_\_

Does the student have any allergies, chronic illnesses, or physical limitations? \_\_\_\_\_

Explain: \_\_\_\_\_

\_\_\_\_\_

**Scholastic Information**

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Has student ever been expelled, dismissed, suspended, or refused admission to another school? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Has student ever had disciplinary difficulty at school? \_\_\_\_\_

If yes, detail: \_\_\_\_\_

Does student have a juvenile or arrest record? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Has student ever used tobacco or nonprescription drugs of any kind? \_\_\_\_\_

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? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

**General Information**

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How did you hear about this school? \_\_\_\_\_

Reason for selecting this school: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Application must be filled out completely before it can be processed.
- A non-refundable registration fee of \$250 or scholarship award letter or letter of intent must accompany application.
- An interview with the parents and the student will be required before final acceptance.
- Please see the Parent/Student handbook or the Statement of Support for information regarding tuition payment.

## ***Parent Agreement***

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I hereby pledge to pay my financial obligation 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 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 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 of the school in the applicant's behalf and authorize this school to employ discipline as it deems wise and expedient for the training of my student.

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.

\_\_\_\_\_  
Signature of Father

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date