

# Kindergarten – 8<sup>th</sup> Grade Student Application

Lenoir City Christian Academy

Today's Date \_\_\_\_\_

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

Student Name \_\_\_\_\_  
Last Name First Name Middle Name Preferred Name

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Primary Phone Number \_\_\_\_\_ Gender ☐ Female ☐ Male

Church Affiliation \_\_\_\_\_ Race \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Other Medical Concerns: \_\_\_\_\_

Physician \_\_\_\_\_  
Name Address Phone Number

## Primary Household

Financially Responsible Party? ☐ Yes ☐ No

Parent/Guardian 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Marital Status \_\_\_\_\_ Primary Phone Number \_\_\_\_\_

Address (if different) \_\_\_\_\_  
Street City State Zip Code

Email \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Where Employed \_\_\_\_\_  
Employer Address Work Phone # Approximate Work Hours

Parent/Guardian 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Marital Status \_\_\_\_\_ Primary Phone Number \_\_\_\_\_

Email \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Where Employed \_\_\_\_\_  
Employer Address Work Phone # Approximate Work Hours

## Secondary Household

Financially Responsible Party? ☐ Yes ☐ No

Parent/Guardian 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Marital Status \_\_\_\_\_ Primary Phone Number \_\_\_\_\_

Address (if different) \_\_\_\_\_  
Street City State Zip Code

Email \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Where Employed \_\_\_\_\_  
Employer Address Work Phone # Approximate Work Hours

Parent/Guardian 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Marital Status \_\_\_\_\_ Primary Phone Number \_\_\_\_\_

Email \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Where Employed \_\_\_\_\_  
Employer Address Work Phone # Approximate Work Hours

## Transportation Plan (Other Authorized Pick-Up Persons):

1.	_____	_____	_____
	Name	Relationship	Phone Number
2.	_____	_____	_____
	Name	Relationship	Phone Number
3.	_____	_____	_____
	Name	Relationship	Phone Number
4.	_____	_____	_____
	Name	Relationship	Phone Number

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## Siblings

1.	_____	_____	_____
	Name	Date of Birth	School
2.	_____	_____	_____
	Name	Date of Birth	School
3.	_____	_____	_____
	Name	Date of Birth	School
4.	_____	_____	_____
	Name	Date of Birth	School

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## Additional Emergency Contact (Other than parents/guardians)

1.	_____	_____	_____
	Name	Relationship	Phone Number
2.	_____	_____	_____
	Name	Relationship	Phone Number

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## Previous Childcare / School

1.	_____	_____	_____
	Name of Institution	Contact Number	Contact Person
2.	_____	_____	_____
	Name of Institution	Contact Number	Contact Person

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## Family and Student Information

In the space below, please provide information about your child that would be helpful for the teacher.

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## Church Involvement:

Are you a member of your church? \_\_\_\_\_ Are you currently seeking for a church? \_\_\_\_\_

Describe your church involvement \_\_\_\_\_

\_\_\_\_\_

## Experiences with others:

How would you describe your child?      Active    Shy    Outgoing    Quiet    Friendly    Reserved

What kind of activities does your child like to do? \_\_\_\_\_

\_\_\_\_\_

Do you have family time together for anytime during the day/evening? \_\_\_\_\_

## Eating Habits:

Favorite foods? \_\_\_\_\_ Disliked foods? \_\_\_\_\_

Food Allergies? \_\_\_\_\_

## Sleep Habits:

Average hours of sleep per night \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

## Student's Performance:

Describe your child's character strengths \_\_\_\_\_

\_\_\_\_\_

Describe your child's character areas to improve \_\_\_\_\_

\_\_\_\_\_

Has your child ever been identified with a special learning disability?      ☐ Yes    ☐ No

Comment: \_\_\_\_\_

Has your child ever been on medication to modify behavior or to enhance ability to learn?    ☐ Yes    ☐ No

Comment: \_\_\_\_\_

Does your child have an IEP/504/psychological assessment?    ☐ Yes    ☐ No

Comment: \_\_\_\_\_

Has your child ever been suspended from school?    ☐ Yes    ☐ No

Comment: \_\_\_\_\_

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## Statement of Compliance for Parents

The process of Christian academic education and discipleship is highly involved and requires significant parental understanding and involvement. Please initial each of the following statements indicating that you have read, understand, and are in compliance with LCCA in the following areas. Failure to comply with these statements may result in the termination of the application process.

\_\_\_\_\_ We have received an on-site tour of Lenoir City Christian Academy and met with a LCCA administrator before enrolling our child.

\_\_\_\_\_ We have received and read the Lenoir City Christian Academy Handbook. We understand the policies of LCCA and will comply with the guidelines as they have been presented. We understand that if questions arise concerning the handbook, we should discuss those questions with the principal or headmaster.

\_\_\_\_\_ We understand that tuition is due for each month that a student is enrolled for even one day of that month. Tuition is due on the first of each month and a late fee of \$20.00 will be charged to the student's account after the 10<sup>th</sup> of the month. Returned checks will require an additional \$20.00 fee. **All fees and tuition are non-refundable.** Should an applicant not be accepted, a portion of the enrollment fee will be refunded. If tuition has not been paid for the previous month, the student will not be allowed to attend the current month.

\_\_\_\_\_ We recognize and support the purpose of Lenoir City Christian Academy, a ministry of First Baptist Church Lenoir City, is to develop a biblical worldview in the lives of students. A biblical worldview is developed as academics are taught through the lens of the Bible, and the teacher-student relationship is one of discipleship. Lenoir City Christian Academy believes in the inerrancy of the Bible. Students are introduced to the work of Jesus Christ who being perfect and blameless died on the cross to save man from their sins.

\_\_\_\_\_ We commit to support the academic endeavors of Lenoir City Christian Academy by working with our child each night to review daily work as available and by reading with our child each day. We understand the primary responsibility for nurturing and educating children is that of the parent as established by the Bible in Deuteronomy 6:4-9.

\_\_\_\_\_ We will support the policies and procedures of Lenoir City Christian Academy to the best of our ability. We will refrain from complaining about the academy, the faculty and administrators, and First Baptist Church with anyone in the community or with other parents. If we have a complaint or concern with the school or church, we will follow the biblical principles of conflict resolution by going to the administrators to address any relevant issues. (Matthew 18:15-17)

\_\_\_\_\_ We understand that the hours of the school are from 8:15-3:00 (3:30), Monday through Friday, and we must bring our child and pick him or her up on time. Fees may be applied.

\_\_\_\_\_ We authorize Lenoir City Christian Academy to pursue emergency medical care for our child.

\_\_\_\_\_ We give permission for a topical ointment (i.e. anti-itch ointment, sunscreen, etc.) to be put on our child. To my knowledge, our child does not have an allergy or sensitivity. We understand that this will be used only as an "as needed" basis.

Comments: \_\_\_\_\_

\_\_\_\_\_ In case of emergency evacuation, We give my permission to Lenoir City Christian Academy to transport our child to either Christ Covenant Presbyterian (12915 Kingston Pike, Knoxville, TN 37934) or Highland Park Baptist Church (4333 US-11, Lenoir City, TN 37772).

\_\_\_\_\_  
parent signature

\_\_\_\_\_  
date

\_\_\_\_\_  
parent signature

\_\_\_\_\_  
date

# Kindergarten – 8<sup>th</sup> Grade Student Application

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## Statement on Marriage, Gender, and Sexuality

**First Baptist Church of Lenoir City, Tennessee and Lenoir City Christian Academy believe:**

1. That God wonderfully and immutably creates each person as male or female. These two distinct, complementary genders together reflect the image and nature of God. (Gen. 1:26-27.) Rejection of one's biological sex is a rejection of the image of God within that person.
2. That the term "marriage" has only one meaning: the uniting of one man and one woman in a single, exclusive union, as delineated in Scripture. (Gen 2:18-25) We believe that God intends sexual intimacy to occur only between a man and a woman who are married to each other. (1 Cor. 6:18; 7:2-5; Heb. 13:4.) We believe that God has commanded that no intimate sexual activity be engaged in outside of a marriage between a man and a woman.
3. That any form of sexual immorality (including adultery, fornication, homosexual behavior, bisexual conduct, bestiality, incest, lesbian, gay, transgender, or queer) is sinful and offensive to God. (Matt. 15:18-20); 1 Cor. 6:9-10.)
4. That in order to preserve the function and integrity of Lenoir City Christian Academy as the local Body of Christ, and to provide a biblical role model to Lenoir City Christian Academy staff, students, children, and volunteers and the community, it is imperative that all persons employed by Lenoir City Christian Academy in any capacity, or who serve as volunteers, agree to and abide by this Statement on Marriage, Gender, and Sexuality. (Matt. 5:16; Phil. 2:14-16; 1 Thess. 5:22.)
5. That God offers redemption and restoration to all who confess and forsake their sin, seeking His mercy and forgiveness through Jesus Christ. (Acts 3:19-21; Rom. 10:9-10; 1 Cor. 6:9-11.)
6. That every person must be afforded compassion, love, kindness, respect, and dignity. (Mark 12:28-31; Luke 6:31.) Hateful and harassing behavior or attitudes directed toward any individual are to be repudiated and are not in accord with Scripture nor the doctrines of Lenoir City Christian Academy.

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Signature

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Date

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Signature

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Date