



Lanakila Baptist Schools

"Pursuing Christ & Academic Excellence"

APPLICATION FOR ADMISSION

This application does not assure final enrollment but provides information upon which a decision will be based. The **\$50 non-refundable Application fee** is payable with the application.

Academic Year: _____

Applying for Grade: K3 K4 K5 1 2 3 4 5 6 7 8 9 10 11 12 (circle one)

PLEASE PRINT INFORMATION Applicant Information

First Name: _____ Middle Name: _____ Last Name: _____

Goes by: _____ Date of Birth: _____ Age: _____ Gender: Male Female

Applicant lives with: () Mother () Father () Legal Guardian

Parental / Guardian Information

Applicant's parent(s) () Married () Separated () Divorced () Deceased

Father's First Name: _____ MI: _____ Last Name: _____

Wk Phone: _____ Occupation: _____ Employer: _____

Home Address: _____ City: _____ Zip: _____ Phone No. _____

Mother's First Name: _____ MI: _____ Last Name: _____

Wk Phone: _____ Occupation: _____ Employer: _____

Home Address: _____ City: _____ Zip: _____ Phone No. _____

Legal Guardian Name: _____ MI: _____ Last Name: _____

Wk Phone: _____ Occupation: _____ Employer: _____

Home Address: _____ City: _____ Zip: _____ Phone No. _____

If you are the legal guardian, custody documents or proof of legal guardianship, must be provided with application.

Please include **one primary email address for electronic notifications.**

Email Address: _____

Additional Information

ACADEMICS

Last school attended: _____ School Address _____

Do you have outstanding tuition/fees at another school? _____ If so, where? _____ How much? _____

If child has repeated any grade, state grade and reason? () yes () No If yes, what grade? _____

Subject in which applicant is strong in: _____ Subject in which applicant is weak: _____

*Has the student been suspended or dismissed from any school? () yes () No

***If yes** to any question, **please attach** a separate sheet of paper with the specific details of situation.

MEDICAL

Does your child have any physical disabilities? () Yes () No _____

Does your child have a learning disability that we should be made aware of? () Yes () No

Circle all that apply: ADD ADHD ODD Dyslexia Other: _____

Is your child on any medication or in therapy for the above condition? _____ If so, state briefly _____

Did your child receive any special services from previous schools? () Yes () No

FAMILY INFORMATION

Any siblings who have or are attending LBS? () Yes () No If yes, list names and grades _____

Are you an **Alumni of LBS**? () Yes () No What year did you graduate? _____

Number of other children in the family: _____ Ages of other siblings in the same household _____

Two factors most influencing us to apply to LBS: () Academic Reputation () Christian Philosophy () Location

() Displeasure of Local Schools () Desire to attend a Private School () Recommendations from LBS parents

We first learned of LBS through: () Church () Direct Mail () Website () Radio Ads () other _____

If referred, please list the name of the person who referred you: _____

Will you need **Extended Care Services** (grades K3- 6)? *circle* Yes No if yes, AM PM Both

CHURCH AFFILIATION

Religious affiliation or Denomination _____ Church you attend _____



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LBS BRIEF STATEMENT OF FAITH

- We believe the Holy Bible was written by men supernaturally inspired by God.
- We believe there is one, and only one, living and true God.
- We believe the Holy Spirit is a divine person; equal with God the Father and God the Son and of the same nature.
- We believe Satan was once holy and enjoyed heavenly honors, but he fell and after him a host of angels.
- We believe in the Genesis account of creation, and that it is to be accepted literally, and not allegorically or figuratively.
- We believe man was created in innocence, but by voluntary transgression fell from his sinless and happy state.
- We believe Jesus Christ was born of the Holy Spirit, in a miraculous manner of Mary, a virgin.
- We believe that the salvation of sinners is by grace through Jesus Christ, the Son of God.
- We believe that in order to be saved, sinners must be born again; that the new birth is a new creation in Christ Jesus.
- We believe that Christ rose bodily the third day.
- We believe in the imminent return of Christ for His Church and the second coming of Christ with His Church.
- We hold to the beliefs as stated in the King James Version of the Bible that marriage as sanctioned by God in Scripture joins one man and one woman in an exclusive union. We affirm the Biblical principles relating to marriage and sexuality as detailed in the LBS Statement on Marriage Sexuality.

PARENT AGREEMENT

I/We as parent(s)/guardian(s) understand, agree, and commit to the following statement of support:

1. To have our child(ren) taught in the context of Lanakila Baptist School's Statement of Faith and to give encouragement to them as they seek to act on this instruction in their personal lives and experiences.
2. I hereby accept all regulations of the schools on the applicant's behalf.
3. I give permission for my child's image or photo to be used for promotional material & to take part in all school activities, including sports and school-sponsored trips away from the school premises, and absolve the school, as applicable, from all liability from any injury to me or my child, at school or during any school activity.
4. I understand that the administration and faculty of Lanakila Baptist Schools will not tolerate profanity/obscenity, nor a disrespectful attitude toward school personnel and to communicate lovingly to other parents/guardians and faculty concerning their child's behavior.
5. I herewith authorize this school to employ such legal and reasonable discipline as it seems wise and expedient for my child.
6. To attend school-related meetings designed to foster a community of LBS parents/guardians who are more equipped to work with the school and one another, to educate our children, and to be more unified in our ability to encourage one another.
7. I have read the terms stated on this application and agree to willingly support the educational goal of creating the best possible atmosphere for the training of my child.

(PRINTED NAME OF PARENT OR GUARDIAN)

(SIGNATURE OF PARENT OR GUARDIAN)

THIS SECTION FOR STUDENTS IN GRADE 7-12 ONLY

I, the undersigned, hereby agree to give my wholehearted cooperation as a student who has the privilege of attending this great school and pledge to refrain from the following:

- Actual violence and damage against the persons or the physical property of this institution
- Verbal threats or expressed acts of potential violence
- Smoking, drinking, gambling, illicit drugs
- Improper intimate or sexual relationship
- Fighting, profanity or filthy language
- Critical and uncooperative attitudes and any conduct that will reflect unfavorably upon the testimony of Lanakila Baptist Schools

I further understand that the privilege of attending Lanakila Baptist can be removed at any time if the above are violated, or in the opinion of the administration, that my continued presence is considered not in the best interest of the school.

(PRINTED NAME OF STUDENT)

(SIGNATURE OF STUDENT)

FOR OFFICE USE ONLY

Date application received: _____

Application Fee paid: \$ _____ cash check # _____ CC 3.5% surcharge Receipt # _____

Assessment Date: _____ Time: _____

Interview Date: _____ Time: _____

Date accepted: _____ Date denied: _____

Enrollment Fee paid: \$ _____ cash check # _____ CC 3.5% surcharge Receipt # _____

Tuition Payment Options

- Annual Payment Plan**
 - 100% payment, less 5% discount, must be received by **July 15**
 - This discount does not apply to families receiving scholarships.
 - This does not apply to families enrolling in the middle of the school year.
- Semi-Annual Payment Plan**
 - 50% of tuition is due by **July 15**
 - Remaining 50% balance is due by **December 4**
- Monthly Automatic Tuition Payment (ATP) option** will require a \$40.00 enrollment fee with the first month's tuition payment. Tuition is due on the 5th or the 20th of each month from June 5 - May 5. Final balance will be processed on May 5.
 - o 12- Month option begins June 5
 - o 11- Month option begins July 5
 - o 10- Month option begins August 5

Amount paid: \$ _____ cash check # _____ CC 3.5% surcharge Receipt # _____

TUITION AGREEMENT

Students who enroll are obligated to payment of full tuition and fees for the full academic year including cases of any absences, early withdrawals or dismissals. This obligation may be cancelled by notifying LBS in writing by **June 1**. Returning students & siblings of current students are given enrollment priority and any scholarships offered, however new students that are enrolled at LBS may apply for scholarships if funds are still available.

(PRINTED NAME OF PARENT OR GUARDIAN)

(SIGNATURE OF PARENT OR GUARDIAN)