



*Initial Family Application
2016-2017*

Date of Application

Last Name

Father

Mother

Home Phone

Please list the names and ages of all your children:

_____	_____
_____	_____
_____	_____

Write a brief statement for your reasons to education your children at home:

Why are you applying to LCPA? _____

Do you know any LCPA families? _____ Name(s) _____

What curriculum/curricula will you be using? _____

Husband's Occupation: _____ Work Number: _____

Husband's Place of Business: _____

Is wife working outside of the home? _____ Hours/week? _____

Type of work: _____

Are there any "special" challenges or needs in your home, which the Board should know about, in order to best assist you? _____ If so, please explain: _____

Do you and your family attend a church regularly? Yes _____ No _____

Where? _____

What are some things your family enjoys doing together? _____

Please explain your view of the parent/child relationship and the discipline of children:

Briefly describe your relationship to the Lord Jesus Christ:

(When were you saved? How has your life changed?)

Father:

Mother:

What does the Bible say about how a person can be saved?
