

## Applying Student Profile

To be completed by the present school

Please complete and return to: Admissions  
Lighthouse Christian School  
2331 NE 26 Avenue  
Lighthouse Point, FL 33062

Student Name \_\_\_\_\_ Present Grade \_\_\_\_\_

Present School \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

ACADEMICS	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE
Language Arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOCIAL/EMOTIONAL			
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respects Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Has the student experienced disciplinary difficulties? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Can the family meet its financial obligation to the school? \_\_\_\_\_

Is the student eligible to return to your school? \_\_\_\_\_

Signature \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_