



Triumphant Life Christian Academy Student Application for Admission

Student Name: _____
LAST FIRST MIDDLE

Address: _____
STREET

CITY STATE ZIP

School district: _____

Date of Birth: ____/____/____ Social Security #: _____

Current Grade: _____ Grade Entering: _____

Phone: _____ Parent's Cell Phone: _____

Parent's E-mail: _____

Mother's Name: _____ Father's Name: _____

Application Checklist:

- \$50 Registration Fee**
- Forms to be submitted 3 days prior to the interview:**
 - Completed Emergency Data Sheet**
 - Immunization Records Enclosed**
 - Student Records/Transcripts and Test Scores**
 - Any pertinent student behavioral reports/disciplinary actions**
 - Pastoral Reference Form**
- Student/Family Interview**
- Academic/Financial Planning Meeting with the Staff and Parents**
 - Signed TLCA/Parent and TLCA/Student Agreement Forms**