



Lexington Latin School

Family Application Form

2021-2022

Please complete one family application and one student application per child.

Church Affiliation	
Family Church Affiliation	

Father's Information			DATE COMPLETED: _____
Father's Name			
Address			City
	State	Zip	County
Home Phone			Work Phone
Cell Phone			Email
Employer			Title
Highest Degree/ Area of Education			

Mother's Information			
Mother's Name			
Address			City
	State	Zip	County
Home Phone			Work Phone
Cell Phone			Email
Employer			Title
Highest Degree/ Area of Education			

Preferred Contact Father Mother Other _____

Name of Student	Birth Date	Rising Grade	Program <i>(check one)</i>	
			2-Day* (K-2 nd)	3-Day
1.				
2.				
3.				

**Limited spots. Please call or text (859) 429-8654 to check for availability.*

Were you referred to LLS by a current family? Yes No By whom? _____



Lexington Latin School

New Student Application Form

2021-2022

Please attach
photo here.
(Optional)

Please complete one copy of this page for each student.

Date		Previous Schools		
		School	Grades	Address
Applicant's Name				
Applying for Grade:				
Current School:				
Currently enrolled in grade:				

Describe this applicant's education history (previous schools, classes, homeschooling).

Describe the applicant's extracurricular interests and/or achievements:

Describe any special circumstances which have affected or may affect the applicant's performance in school, for example, illness or physical handicaps, particular learning difficulties, or frequent changes of homes or schools).

Parent Signature _____ Date _____

Lexington Latin School



New Student Application Form 2021-2022

Please complete one copy of this page for each student.

Please attach
photo here.
(Optional)

Date	
Applicant's Name	
Applying for Grade:	
Current School:	
Currently enrolled in grade:	

Previous Schools		
School	Grades	Address

Describe this applicant's education history (previous schools, classes, homeschooling).

Describe the applicant's extracurricular interests and/or achievements:

Describe any special circumstances which have affected or may affect the applicant's performance in school (for example, illness or physical handicaps, particular learning difficulties, or frequent changes of homes or schools).

Parent Signature _____ Date _____



Lexington Latin School

Statement of Faith

Parent/Teacher/ Staff Statement of faith

- I believe in God, the Father, Creator of Heaven and earth.
- I believe in Jesus Christ, his only son, our Lord
- I believe Jesus was conceived of the Holy Spirit, and born of Mary, a virgin
- I believe Christ suffered under Pontius Pilate, was crucified, died, was buried, and descended to the dead.
- I believe that on the third day, He rose again.
- I believe He ascended into Heaven and sits at the right hand of the Father.
- I believe He will come again to judge the living and the dead.
- I believe in the united church for which He died.
- I believe in the Holy Spirit.
- I believe in the communion of all the saints.
- I believe in the forgiveness of sins.
- I believe in the resurrection of the body.
- I believe in the life everlasting.

My signature below signifies that I agree to the above Statement of Faith and to the moral tenants of the Faith as written in the Scriptures of the Holy Bible.

Name

Date

Printed Name