Student Information Request - Early Childhood

Japhet School appreciates your assistance in providing complete and thorough documentation to our Admissions Office. Your observations and this evaluation form are necessary to accurately and fairly evaluate students prior to admission.

To the Parent or Guardian:

Fill out this section only, and then submit to the appropriate representative of your student's current school.

Student Name: _____ Current grade: _____

Parent or Guardian Name: _____ Cell: _____

Current or Former School or Daycare: _____ School Phone: _____

School / Daycare Address: _____

I agree as parent/guardian, on behalf of myself and my child, to waive our right to access this form. I authorize the release of the requested information and understand the information contained and reported will be considered confidential by Japhet School administration, admissions personnel, and faculty who would teach my child.

Parent signature: _____ Parent email: _____

To the Head of School, Principal, or School Director:

The student named above is applying for admission to Japhet School. We appreciate your cooperation in completing this form. This evaluation and its contents will remain confidential, and will only be used by school personnel in connection with an admissions decision.

Please fill out the next sections, give to the primary teacher for assessment, and return the completed form via email to maddy.grunow@japhetschool.org.
DO NOT RETURN TO THE PARENT.

Attachments (copies, not originals): [ ] Recent evaluations

Administrator or Director Name and Title:

_____

Phone: _____ Email: _____

Has this student ever been expelled from your school? [ ] Yes [ ] No
Has this student ever been suspended, either in or out of school? [ ] Yes [ ] No
If yes to either, please explain (attach additional sheets if necessary): _____

_____

Additional Student Information

Student name: _____

Does this student receive special education services, paraprofessional help, necessary 1-1 instruction support identified in an IEP, or any other related support for a learning difference?

[ ] No.

[ ] Yes. Explanation: _____

_____

_____

If the student has an IEP, please attach it.

To the Teacher:

Your feedback is confidential, read ONLY by Japhet School personnel for the purpose of admissions.

Please share your observations on the strengths, weaknesses, learning style, behavior, or classroom accommodations needed of this student. Attach any additional material if necessary.

_____

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Please comment on the parent's/guardian's support of the child's learning and adult cooperation with the school.

_____

_____

_____

_____

Please comment on the student's character, citizenship, and contributions to your school community.

_____

_____

_____

_____

To the Teacher, continued

Student name: _____

Please rate the applicant with ✔.

Trait	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Receptive to instruction; Cooperative					
Intellectual curiosity					
Ability to learn in a group					
Ability to work & play with others					
Ample oral communication skills					
Cognitive readiness - for age level					
Overall behavior & character					

Thank you for taking the time to complete this form. Please return to your Head of School, Principal, or Director, who will send it to Japhet School.