



This form is to gain a general insight into each applicant and ensure that we are prepared for every prospective student's visit. We have applicants from a wide range of ability levels, so some of the inquiries may or may not apply to your child.

JORDAN LAKE SCHOOL OF THE ARTS

STUDENT INFORMATION FORM

Prospective Student Name:

Completion Date:

Completed By:

If you answer "yes" to any question, please provide additional information.

Does or has your child ever wandered away?

Will they potentially leave the class / group / school without telling anyone?

Does your child need assistance to address all of their toileting needs?

Does he/she have difficulty vocalizing their wants and needs concerning use of the restroom, hunger, thirst, feeling pain or not feeling well?

If they have a unique way of expressing these needs, what are they?

Are there any expressions, phrases, or scripts that your child uses at a certain time to convey other specific information?

Does your child have any allergies?

Are they on a special diet?

Do they take medication?

JLSA does not administer medication to students. You will be required to bring and administer medication as needed. If a child is on medication, please provide dosage and name for emergency reasons. If a child has an adjustment or is taken off a medication please notify the school so we can be attentive to any side effect.

Does your child current receive speech, occupational therapy, psychological or physical therapy services?

Would you like these serviced to be provided during school on site?

DESCRIBE YOUR CHILD'S SENSORY NEEDS:

AUDITORY:

Has your child been diagnosed with an auditory processing disorder?

Does your child have heightened sensitivity?

What noises are difficult for your child? Enjoyable?

What is your child's response to too much sound input?

TOUCH:

Has your child been diagnosed with a sensory integration issue?

Does your child avoid contact with others? How?

Do they seek out contact? How?

Are certain light touches physically painful for your child?

Does your child seek out physical activity? What? How often?

Do they enjoy certain mediums and textures?

Which do they avoid?

Do they have an aversion to being wet or dirty?

What is their response to such situations?

TASTE:

Does your child avoid certain foods?

Do they seek out certain foods?

What textures do they prefer or dislike?

SMELL:

Does your child have a heightened sense of smell?

What scents do they like or dislike?

Do they have any physical reaction to certain scents (i.e. vomiting, gagging, and / or headaches)?

SIGHT:

Does your child have any issues with their vision?

Are they sensitive to light? Fluorescent lights? Colors?

GENERAL:

Does your child put objects in their mouth?

Do they have any self injurious behaviors?

Have they ever been aggressive towards others?

Please describe their fine motor abilities:

Do they properly use scissors and pencils?

Please describe gross motor (coordination, etc.):

Are they able to use garden tools?

Can they throw a ball?

ANXIETY:

How does your child deal with anxiety?

What are the signs that your child is feeling overwhelmed?

What situations generally create this reaction?

How can we best help your child when they are stressed?

How can we best guide them into new situation without overwhelming them?

What should we do to help your child if they become overwhelmed?

Does your child benefit from chewing gum, squeezing something, twisting something, etc during stressful times?

What song, book, or activity helps your child recover from stress and feel safe?

COMMUNICATION:

Please describe your child's verbal abilities:

What type of vocabulary does your child have?

Do they have unique terms / word use that we should know to help them?

Describe where and when your child is most vocal:

How do they convey their basic needs and emotions?

Is your child able to read aloud, speak to a group, or have one on one conversation or exchange?

EDUCATIONAL:

What is your child's current academic level?

Describe their ability to read, what they are currently reading, and how they convey comprehension.

What is their handwriting ability?

Are they able to use a computer? How? Keyboarding level?

What math skills does your child have?

What approach and materials have been most effective in teaching your child?

How long can your child focus on one activity?

Can they follow guidelines or do they require direct instruction?

What educational goals do you think are appropriate for the next six months for your child?

SOCIAL:

Can your child play with others? Do they play alongside them or interact?

Could they participate in a board game, catch, or interactive activities without support?

Do they have challenges turn taking or sharing?

Will they sit / stay in a group for an activity?

What social activities do they enjoy most? Least?

What social goals do you think are appropriate for your child for the next six months?

INTERESTS:

What are the activities and things that your child loves?

What are their greatest strengths?

Please provide any information that will help us to know and understand your child best.

JORDAN LAKE SCHOOL OF THE ARTS

Application for Enrollment

Application Date: _____

Student Information

Name of Child: _____

Name Called: _____

Last First Middle

Sex: ____ F ____ M Age ____ Date of Birth : _____ Place of

Birth: _____

Home Address:

Home Phone: _____

For which program are you applying? Elementary _____ Middle School _____

Upper _____

For which school year are you applying? _____

Family Information

Parent's Name

Home Address

Home Phone

Cell Phone Cell Phone

Employer

Work Address

Work Phone

Email address

Student Educational Information

Name of school/child care setting your child currently attends:

Current grade level: _____ Days your child attends: _____

Full Address:

School Phone Number: _____

Name of a Contact Person: _____

Do we have your permission to contact your child's current school/setting? ___Yes ___ No

Has your child ever been referred for educational/psychological testing? ___Yes ___ No

If yes, please share the results of the referral/testing or indicate how JLSA can request a copy of this information.

Student's Health Information

Does your child have any allergies (such as food, dust, drugs, plants, insect bites, etc.) If yes, what are they?

Please list any health or medical information that might affect your child's daily life at school:

Is your child on any medications? If so, please list and indicate dosage.

Please provide any information concerning your child which will be helpful in his/her experiences in group living (such as play, eating and sleeping habits, special fears, special likes or dislikes).

Interview

Please provide a thoughtful response to each of the following questions (attach additional sheets if needed):

What factors have led you to choose Jordan Lake School of the Arts for your child and family?

What role do you want the school to fill in your family's life?

If you were to walk into your child's classroom, what kinds of things would you like to see happening?

How would you describe your child's; needs, personality, strengths, and weaknesses as you see them?

Parent involvement is an essential part of the school. How would you like to be involved in the life of the school and of your child's classroom?

Jordan Lake School of the Arts works hard to meet the needs of each of its students and to ensure that our program is a match for all of our enrolled students and their families. Sign below to indicate that this application is both complete and accurate.

Date Parent or Guardian Signature

Please enclose your \$50 application fee.

Return your application to

Jordan Lake School of the Arts

1434 Farrington Road Suite 100

Apex, NC 27523

(919) 387-9440 phone

Each application is considered individually with family and previous teachers' input.

Jordan Lake School of the Arts accepts students whose educational needs can best be met in our setting. It is our goal that the staff and families composing the school community will mirror the diversity of the community in which we live. *Acceptance to the school is in no way based on race, religion, gender, handicapping conditions or economic status. We welcome families in all their diversity.*