

New Student Interview

Name of Student	
Date of Birth	
Name of Immediate Past School	
Address (Street, City, State, ZIP)	
Principal	
Most Recent Teacher	
How many schools has your child attended since first grade?	
Reason for leaving the two most recent schools	1. 2.
Last Grade Completed	
Current Grade	
Has your child ever been retained?	<input type="checkbox"/> Yes - when and where: <input type="checkbox"/> No
Has your child ever been home schooled? If yes, what grades	<input type="checkbox"/> Yes - Grades _____ <input type="checkbox"/> No
General Achievement Level (as indicated by most recent achievement tests or grades)	<input type="checkbox"/> Below Average <input type="checkbox"/> Average <input type="checkbox"/> Above Average

<p>What learning problems does this child have?</p>	
<p>Has the student been placed in special education previously?</p>	<p><input type="checkbox"/> Yes - If yes, please indicate: Tested by whom? _____ Where? _____ When? _____</p> <p>Type of special ed placement:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mainstream with accommodations/ modifications <input type="checkbox"/> Pull-out (isolated classes) <input type="checkbox"/> Resource (less than ½ of school day) <input type="checkbox"/> Special Day (more than ½ of school day) <p><input type="checkbox"/> No</p>
<p>Does your student have an IEP?</p>	<p><input type="checkbox"/> Yes - If yes, please indicate: Accommodations indicated:</p> <p>Modifications indicated:</p>

Does your child take prescription medication:	Name of medication _____ Frequency of medication _____	
Has your child been:	Suspended: <input type="checkbox"/> Yes - please explain: <input type="checkbox"/> No	Expelled: <input type="checkbox"/> Yes - please explain: <input type="checkbox"/> No
Parent Certification	<p>I hereby certify that the information contained in the New Student Interview is true and correct to the best of my knowledge. I agree to have any of the statements verified, and authorize the references listed to provide the school any and all information concerning the applicant. I understand that any misrepresentation, falsification, or material omission of information concerning this student may result in dismissal of the student from school.</p> <p>Since non-public schools are not mandated or equipped to provide Special Education, this school retains the right to determine if it is able to meet the individual needs of the applicant. I understand if it is determined the student cannot be served adequately by this school, recommendations for alternative educational placement will be made, and/or the student may be asked to withdraw at any time.</p> <p>I give permission and consent for you to receive copies of all school records, including special education records.</p> <p>_____</p> <p style="text-align: center;"><i>Parent/Guardian Signature</i> <i>Date</i></p>	

This school receives no federal funds and is therefore not subject to the IDEA, ADA, and Section 504 of the Rehabilitation Act of 1973

For more information, please refer to the REACH Resource Manual prepared by the North American Division Office of Education



Adventist Education

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