

**Applicant Information**

\_\_\_\_\_  
 First name \_\_\_\_\_ Last name \_\_\_\_\_ Date of birth \_\_\_\_\_ Current Grade Level \_\_\_\_\_  
 Male \_\_\_\_\_  
 Female \_\_\_\_\_ Diagnosis \_\_\_\_\_ Names and purpose of medications, if any \_\_\_\_\_  
 \_\_\_\_\_  
 Current school \_\_\_\_\_  
 \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  Public  Mainstream  With pullout  
 Private  Special day class

**CURRENT GRADE LEVELS IN:**

Language \_\_\_\_\_  
 Arts: \_\_\_\_\_  
 (Decoding) (Comprehension) (Writing) Math: \_\_\_\_\_ Science: \_\_\_\_\_ Soc. Studies: \_\_\_\_\_

PLEASE ATTACH RECENT PHOTO OF STUDENT

**SERVICES CURRENTLY RECEIVED/NEEDED:**

OT  Speech & Language  Other, please specify \_\_\_\_\_  
 Slingerland  Social Skills

**TESTING:** Please list most recent tests administered. Attach additional pages if needed.

\_\_\_\_\_  
 Type of test \_\_\_\_\_ Given by \_\_\_\_\_ Date given \_\_\_\_\_  
 Please enclose most recent test results

**IEP?**  Yes \_\_\_\_\_  
 No Date of most recent IEP \_\_\_\_\_ IEP recommended placement \_\_\_\_\_

**PAYMENT:** Funded by school district  Private payment  \_\_\_\_\_  
 Month/Year of proposed entrance \_\_\_\_\_

How did you hear about Star Academy?

**Parent/Guardian Information**

_____	_____	_____	_____
Name	Name	Name	Name
_____	_____	_____	_____
Home address	Home address	Home address	Home address
_____	_____	_____	_____
City	State/Zip	City	State/Zip
_____	_____	_____	_____
Home phone	Work phone	Home phone	Work phone
_____	_____	_____	_____
Cell phone	Relationship to student	Cell phone	Relationship to student

# General Information

STUDENT NAME: \_\_\_\_\_

Date of birth

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City, state, or country of birth \_\_\_\_\_ Primary language spoken at home \_\_\_\_\_ Ethnicity (optional) \_\_\_\_\_

Adopted?  Yes  No \_\_\_\_\_  
Age when adopted \_\_\_\_\_ Date when adopted \_\_\_\_\_

Student lives with:  Mother  Father  Both  Other: \_\_\_\_\_

Information about brothers and sisters:

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

# Parent Profile of Student

Which situations create stress for your child? \_\_\_\_\_  
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How does your child cope with stress? \_\_\_\_\_  
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Describe your child's social interaction with peers. \_\_\_\_\_  
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What are his/her social strengths/deficits: \_\_\_\_\_  
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Describe his/her academic challenges: \_\_\_\_\_  
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Please give any other information (e.g. are there/have there been any recent major stressors in student's life—separations, losses, moves, illnesses, etc.? What are his/her strengths, interests, talents, etc?). Attach additional pages if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature

Relationship to student

Date

# Financial Aid

Some limited scholarships are available based on financial need. If you wish to apply for a scholarship please complete the enclosed Scholarship Application Form.

## Current Information Necessary for Admissions Application:

- Completed application form
- Check for \$100 non-refundable application fee
- Recent photo of student
- Medical history
- Copy of recent screening for vision and hearing
- Current immunization record
- Neuropsychological evaluation (if available)
- School psychological evaluation (if available) including intelligence test results
- Speech and language assessment summary (if available)
- Occupational therapy evaluation (if available)
- Educational achievement test with present level of performance in decoding, reading, comprehension, writing, math, science, social studies
- Copy of current IEP (if available/applicable)
- Copies of last 2 report cards
- Other assessments or evaluations (e.g. Lindamood-Bell)