



Request for Information for Students Applying for Admission

To be completed by Parent of Legal Guardian (please print)

Student's full Name _____ Birth Date _____
 (Last) (First) (Middle)

School Transferring From _____ Current Grade _____

School Address _____
 (Address) (City) (State) (Zip)

I give my permission for this form to be completed and returned to The Academy at Minds In Motion School. This is not a request for Transfer of Records.

Parent/Guardian Signature _____ Date _____

To be completed by Teacher or School Official

Reading Process

___ Above Level
 ___ On Level
 ___ Below Level

Math Process

___ Above Level
 ___ On Level
 ___ Below Level

Writing Process

___ Above Level
 ___ On Level
 ___ Below Level

If below level, please give any interventions that have been tried:

School Day Skills

	Always	Usually	Seldom		Always	Usually	Seldom
Completes work on time	___	___	___	Exhibits self control	___	___	___
Follows directions	___	___	___	Positive interaction	___	___	___
Organizational habits	___	___	___	With peers	___	___	___
Personal responsibility	___	___	___	Cooperative worker	___	___	___
				Leadership	___	___	___

	High	Med	Low
Amount of extra time required for academic instruction	___	___	___
Amount of extra time required for behavior modification	___	___	___
Level of parent involvement in the classroom & with learning process	___	___	___

If entering K, is this child ready for K _____ yes _____ no
 Is he/she ready for full day? _____ yes _____ no
 Special medical information on file in the office _____ yes _____ no

Special information to next teacher or the office: daily medication, unusual home situation, frequent absences, frequently ill, frequently tardy, separation from another student needed.

Explain: _____

Name of person completing report _____ Title _____ Date _____

Do we have permission to contact you to discuss: _____ (phone number)

This report is confidential and for administration use to determine acceptance.

Thank you. Please mail completed form to:
 The CinDay Academy
 Mrs. Gina Pangalangan, Principal
 11 Sycamore Creek Dr
 Springboro, Ohio 45066