

HAS YOUR CHILD EVER: (If yes, please give details on back)	YES	NO
BEEN RECOMMENDED FOR OR RECEIVED ANY SPECIAL LEARNING ASSISTANCE?		
REPEATED A GRADE?		
BEEN SUSPENDED FROM SCHOOL?		
BEEN DENIED ADMISSION TO A SCHOOL?		

FAMILY DETAILS

PARENT DETAILS	FATHER	MOTHER
FAMILY NAME		
FIRST NAME		
NATIONALITY		
RELIGION		
COMPANY		
POSITION		
CELL #		
BUSINESS/HOME		
EMAIL		

OTHER CHILDREN IN THE FAMILY

NAME	AGE	SCHOOL

PLEASE DESCRIBE YOUR CHILD

1. My child as a learner is _____

2. My child's interests are _____

3. My child needs help with _____

4. My child's strengths are _____

5. My child's personality can be described as _____

6. I support my student at home by:

As parent/guardian, I attest all information stated above is true and accurate.

Date Name (please print) Signature