



the **LernerSchool**
Learning for Life

Student Information Form

For applicants to the Lerner School's Kindergarten Program

To the parents of the applicant:

Please print your child's name, birthday, and school year you are applying for. Read and sign this form, and deliver it to your child's current teacher and/or daycare provider with a stamped envelope addressed to the Admissions Director at the Lerner School.

Applicant Name _____ Birthday ____/____/____ School Year Applying for _____

Please read and sign the statement below.

I, _____, understand and agree that the information contained in my child's Student Information Form is confidential. Lerner's Admissions Office will have access during the application process where it will remain confidential. I also agree that this completed Recommendation Form will not be available to applicants, parents, or anyone outside the Admissions Committee, and I waive any right that I may have to see it.

Signature _____

Date _____

To the Teacher or Care Provider:

The above named student has applied for admission to the Lerner School. Please provide your candid assessment of this student as it is of primary importance in the evaluation process. We appreciate any information you believe would be helpful. Please include comments concerning strengths, weaknesses, or any special accommodations or supports needed by this child and/or family. Please use a separate page for further comments in any category. All comments shared are confidential. Please send this form to the address on the bottom of the last page of this form.

Please check the box that best applies	Usually	Sometimes	Seldom	Please Comment
SOCIAL DEVELOPMENT				
Interacts well with other children				
Interacts well with adults/teachers				
Shares well with others				
Initiates play activities				
Is imaginative				
Works well independently				



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Continued	Usually	Sometimes	Seldom	Please Comment
SKILL DEVELOPMENT				
Is attentive				
Listens in a group				
Contributes to discussions				
Follows directions				
Works cooperatively				
Completes tasks in a timely manner				
Can focus on one task				
Respects classroom routines				
Changes activities easily				
Willing to try new activities				
Is a self-starter				
Expresses ideas well				
Displays creativity				
Exhibits problem-solving abilities				



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Continue	Yes	No	Please Comment
ACADEMIC READINESS			
Recognizes most upper case letters			
Recognizes most lower case letters			
Knows the alphabet a-b-c order			
Recognizes random letters			
Recognizes basic colors			
Recognizes random numbers 1-20			
Can match numbers to quantities			
Can count from 1 - _____			
Can recognize a pattern (such as a-b-c, etc.)			
Recognizes rhyming patterns			
Knows birthday			
Recognizes basic shapes			

Is able to write name:

Indicate which part they can write: First Name _____ Last Name _____



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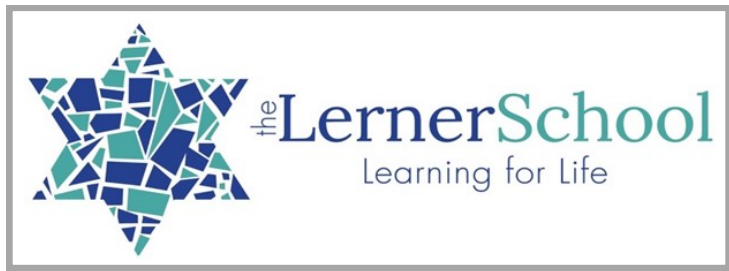
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Continue	Outstand- ing	Age Appro- priate	Needs De- velopment	Please Comment
SMALL MUSCLE CONTROL/COORDINATION				
Pencil grip				
Cutting skills				
Coloring skills				
Tracing skills				

Shows right side or left side preference: Right _____ Left _____

Continue	Outstand- ing	Age Appro- priate	Needs De- velopment	Please Comment
LARGE MUSCLE CONTROL/COORDINATION				
Skipping/Hopping				
Able to control bladder/bowel movements				
Catching a ball				
SPEECH DEVELOPMENT				
Verbalizes needs clearly				
Uses correct sound formation				
Uses appropriate speech patterns				



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Please answer the following questions:

Has there been any disciplinary action for this student? If yes, please explain:

Please indicate if this child is receiving or has received any support services, including but not limited to speech, occupational, or physical therapies:

Please feel free to share additional information about the child or the family that would be helpful in the admissions decision process:

My comments on this form will be kept confidential and will only be used to advise the admissions process.

Teacher/Care Provider Name: _____ School: _____

Relationship to Applicant: _____ Phone: _____

Email Address (optional): _____

Questions? Please contact the Admissions Director, Deborah Kleinman,
at 919-286-5517 ext 217 or deborah@lernerschool.org.

**The Lerner Jewish Community Day School
Attn: Admissions Director
1935 West Cornwallis Road
Durham, NC 27705**