

# Student Information Form

### For applicants to the Lerner School's

### Two Year Old Preschool Program

#### To the parents of the applicant:

	To the	parcii	ts of the	applicant.
that we can better serve health, etc. Please uploa	your child's needs. Feel to the finished form when	free to 1 you fi	add com ill out the	ou for providing us with more detailed information so ments concerning your child's strengths, weaknesses, e application online through FACTS Management. Or, om of the last page of this form.
Child's Name				School Year Applying forstatement below.
will remain confidentia	l. I also agree that this co	mplet	ed Recon	the information contained in my child's Student ill have access during the application process where it nmendation Form will not be available to applicants, and I waive any right that I may have to see it.
Signature				Date

Please check the box that best applies	Rarely	Some- times	Always	Please Comment
SOCIAL DEVELOPMENT				
Shows attachment to significant adults (parents, siblings, etc.)				
Looks for "home base" or sig- nificant adults				
Follows simple instructions from adults				
Uses gestures and actions intentionally				
Exhibits a sense of humor				
Plays alone happily				
Begins to imitate others				
Is curious				



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Continue	Rarely	Some- times	Always	Please Comment
PHYSICAL DEVELOPMENT				
Exhibits developmentally- appropriate small muscle control and coordination				
Exhibits developmentally- appropriate large muscle control and coordination				
Exhibits age-appropriate speech/ begins to express feelings in words				
Stacks two objects				
Scribbles				
Throws a ball				
Can self feed				
The family has realistic expectations for the program				

#### Please answer the following questions:

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



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Please feel free to share additional information about the decision process:	child or the family that would be helpful in the admissions		
My comments on this form will be kept confidential and will only be used to advise the admissions process.			
Parent/Guardian Name:	Email Address (optional):		
Relationship to Child:	Phone:		
School: (if currently attends)			

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