



the **LernerSchool**
Learning for Life

Student Information Form

For applicants to the Lerner School's Three & Four Year Old Preschool 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.

	Rarely	Sometimes	Always	Please Comment
Is attentive				
Listens in group				
Follows directions				
Works cooperatively				
Respects classroom routines				
Moves easily between activities				
Is willing to try new activities				
Enjoys new challenges				



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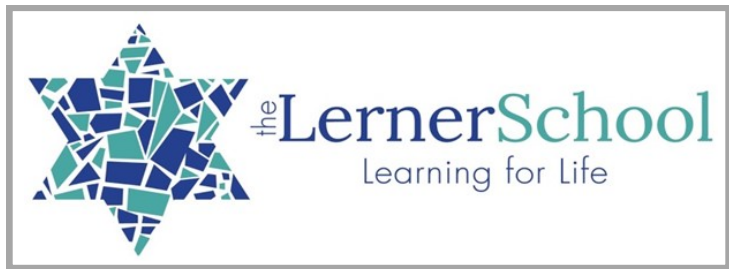
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Continue	Rarely	Some-times	Always	Please Comment
PHYSICAL DEVELOPMENT				
Has or exhibits small muscle control and coordination				
Has or exhibits large muscle control and coordination				
Exhibits age-appropriate speech				
FAMILY				
The family embraces the philosophy of your program				
The family communicates openly and works in collaboration with care providers				
The family follows the rules and policies of your program				
The family has realistic expectations for the child				
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 continue answering questions:

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

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**