



NORTH VALLEY CHRISTIAN SCHOOL

Application for Admission Early Childhood Program

Application 2023-2024

Date: _____ Grade in September: _____

Student Name: _____
First Middle Last

Address: _____
Street City State Zip

Phone: _____

Date of Birth: _____ Birthplace: _____ Male ___ Female: ___

Pupil lives with: _____ Home Language: _____

Church affiliation: _____ Address: _____

School last attended: _____ Dates: _____

Reason for leaving: _____

Address: _____
Street City State Zip

Is student toilet trained? Yes _____ No _____

Was student premature? Yes _____ No _____ By how much? _____

Was or is student developmentally delayed? Yes _____ No _____

*Has student ever received educational or psychological testing, tutoring, remediation, or special educational services? _____

If so, what was the diagnosis? _____

What age(s) were services provided? _____

What services were provided (i.e., Resource program, special day classes, speech, vision services, etc?) _____

* Has student ever been placed on an Individualized Educational Plan (IEP)? _____

If so, what was the IEP diagnosis and what services were recommended or received? _____

Date of last IEP meeting _____ Please supply North Valley Christian School with a copy of the most recent complete IEP.

* Is student taking any medications or receiving educational therapy? _____

If so, for what diagnosis? _____

* Please provide documentation of any tutoring, remediation or special services, IEP's, tutoring records, etc.) with the completed application. Failure to disclose educational or psychological testing and/or remediation will result in the student's dismissal from North Valley Christian School.

