

Please list medications and dosages currently taken:

Medication:

Dosage:

Time(s) taken:

Check all adjustments to your student's program that have taken place in the past two years:

- Special Day Class
- Resource pull-out program
- Adjusted assignments
- After school tutoring
- IEP
- Other:

Name of teacher supervising these adjustments:

School:

Please rate, in order of importance, the four factors which are most important to you in your student's education:

- | | |
|---|---------------------------|
| _____ Improvement of academic skills | _____ Spiritual growth |
| _____ Personal responsibility/character development | _____ Social development |
| _____ Mainstream education | _____ Reasonable workload |
| _____ Personal, individual instruction | |

What is your student's school motivation/effort level?

- _____ Highly motivated
- _____ Generally motivated
- _____ Needs frequent prompts and reminders to stay motivated
- _____ Somewhat disinterested/lacking motivation

Student agrees to: (student must read and initial)

- _____ Finish all homework and classwork on time in all classes
- _____ Write assignments down on paper or electronically and show it to parents each day
- _____ Seek help when reaching areas of difficulty from teacher, parent, or director
- _____ Pay attention in class and participate in all discussions and group work
- _____ When absent, make-up all work and hand it in per teacher deadlines

Parents/Guardians agree to: (Parent/guardian must read and initial)

- _____ I/we agree to provide the administration with recent (completed within the last 3 years) psycho- educational testing results, IEP, or physician's diagnosis with supporting tests.
- _____ I/we agree to provide daily a time and place at home to monitor our student's work, student planner, and study needs.
- _____ I/we agree to hold the student accountable to a minimum C grade level in all classes.
- _____ I/we agree to communicate with the teachers or director, as difficulties arise.
- _____ I/we understand that students in the program sign a contract agreeing to be accountable for all expectations, including writing down assignments daily and exerting maximum effort.
- _____ I/we understand that there is an additional charge of \$1,100 (K-6) or \$2,200 (7-12) per year for the *L.E.A.R.N. Academy*. I/we agree to have this charge added to the monthly tuition bill. This charge is non-refundable.
- _____ I/we understand that all *L.E.A.R.N. Academy* students enter the program on a probation basis, until it is determined if the student is willing to put forth their best effort. Students and parents who meet the criteria and comply with contract conditions will quickly be released from probationary status, usually after the first semester. If a student earns a D or F in any class they will be placed back on probation for the following semester.
- _____ I/we understand that additional *L.E.A.R.N. Academy* placement tests may be required before entry. The interview will be scheduled when the registration forms, *L.E.A.R.N. Academy* Application with recent psycho-educational testing, and all testing (entrance and placement) is completed. Admission to the *L.E.A.R.N. Academy* can only take place after the application has been received and evaluated by the Director.