



# Kuper Academy

## Student Profile

(to be completed by parent)

Name of Student: \_\_\_\_\_ Applying for grade: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

Does your child have a certificate of eligibility?  No  Yes

Describe your child's learning experiences to date. \_\_\_\_\_

How does your child adjust to new situations? \_\_\_\_\_

Does your child make friends easily? \_\_\_\_\_ If not, what are some of the issues you have noticed? \_\_\_\_\_

Does your child have any friends at Kuper? If so who are they? \_\_\_\_\_

What hobbies, activities does your child enjoy? Does he/she participate in any organized sports? \_\_\_\_\_

What language(s) does your child speak? \_\_\_\_\_

What is your child's mother tongue? \_\_\_\_\_

Does your child have any allergies or medical conditions we should know about? \_\_\_\_\_

Does your child require an epipen? \_\_\_\_\_ If yes, will he/she have one to bring to school? \_\_\_\_\_

Does your child have any diagnosed learning disabilities or developmental delays? If so what are they? \_\_\_\_\_

Has your child ever been seen or is currently being seen by any of the following:  Yes  No

Speech/language pathologist \_\_\_\_\_ Name: \_\_\_\_\_

Occupational Therapist \_\_\_\_\_ Name: \_\_\_\_\_

Psychologist \_\_\_\_\_ Name: \_\_\_\_\_

Do you have reports from any professionals? Are you willing to share these reports with us? \_\_\_\_\_

Is your child currently or has he/she ever been on an IEP? \_\_\_\_\_