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MIDDLE AND UPPER SCHOOL
 School Application Form

I. Students Legal Name: _____

Last	First	Middle		Nickname
_____		_____		_____
Address _____		City _____		Date of Birth _____
Second Address (if Applicable) _____		City _____		Age _____

Gender: Male _____ Female _____

Religion: _____

Program Applying for: Grade 4 _____ Gr. 8 _____
 Grade 5 _____ Gr. 9 _____
 Grade 6 _____ Gr. 10 _____
 Grade 7 _____ Gr. 11/12 _____
 SPED (Transition or Inclusion) _____

II. Mother's Name: _____

	Home Phone _____	Mobile number _____
Employer and Place of Employment _____	Occupation _____	Business Phone _____

EMAIL: _____

Father's Name: _____

	Home Phone _____	Mobile number _____
Employer and Place of Employment _____	Occupation _____	Business Phone _____

EMAIL: _____

Is the child adopted? ____Yes ____No If YES, What year and age was he/she adopted? _____

List all Children in the family in order of birth

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____

List other adults living with you other than the immediate family.

Name of Adult	Date of Birth
_____	_____
_____	_____
_____	_____

What is the Language used at Home? _____
 Second languages or other languages the child is exposed to: _____

If your child attended specific programs or had private tutoring and/or therapy, fill in the following:

Name and Address of School/Center	Teacher/Therapist	Dates	# hours/wk
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for private tutoring and/or therapy programs: _____

Who referred you to CLP school? _____

III. MEDICAL

General health at present: ___ poor ___ fair ___ good

Major illnesses, childhood diseases, high fevers, ear infections, injuries, operations. Give age of child with each. _____

Allergies: _____

Is your child now receiving regular medication of any sort? ___ Yes ___ No

Name of Medication: _____ Dosage: _____

Describe handicaps/ or chief problems if any? : _____

Diagnosis if any: _____

IV. AWARDS AND TALENTS

List special talents/interests/hobbies your child exhibits:

List special lessons in sports/music/etc... that your child has received or is currently receiving (indicate dates/duration/location, and other details):

List special awards /medals your child has received:

V. Parenting and Schooling:

My child spends most of his/her time with: ___ parent/s ___ nanny/caregiver ___ other relatives

Check one:

___ I/we believe in establishing routine.

___ I/we believe routine should be flexible and allows for a lot of changes according to our own activities (parent's work /career, etc...)

My child follows this routine at home: wake up time: _____ bed time: _____

Morning activities: _____

Mid-morning activities: _____

Activities after lunch: _____

Afternoon activities: _____

Nighttime or routine after dinner: _____

I/We believe in this/these (one or more) types of discipline practices:

corporal punishment grounding/withdrawal of privileges explaining why it is wrong
 none, because they are capable of deciding right from wrong

For each of the ff. pairs of statements, choose one as your primary belief:

I/We believe children should be drilled in reading, writing and learning math as early as possible.

I/We believe children should be given more time to play and explore their surroundings.

I/We believe children should be given homework at least three up to five times a week.

I/we believe children should continue their learning at home through guided play and interaction with knowledgeable adults

I/We believe children should learn firstly, how to socialize and interact properly, secondly, academics.

I/We believe that in order to be excellent, children should be fully immersed in academic work.

I/We believe in partnering with the school to help our child have a happy and successful school life.

I/We believe it is the school's sole responsibility to enable our child to learn academic concepts.

I/We believe in the inclusion philosophy where both neuro-typical learners and learners with special education needs interact and learn from each other.

I/We believe that learners with special education needs have to be segregated in special education schools rather than in a regular classroom.

I/We believe children should learn about the Philippines and to speak Filipino in order to widen their understanding of themselves and of the world.

I/We believe children should learn to speak English first because it is regarded as a global language.

I/We believe children should learn about peace building, conflict resolution and non-violence and have much opportunity to practice these values.

I/We believe peace and socio-civic issues and concerns should not be mixed with academic learning.

I/We believe it is necessary for today's children to learn about ways to save the environment.

I/We believe caring for the environment should not be given priority in the school curriculum since it is already receiving strong support from the media and other public institutions.

Goal/s for my/our child's schooling:

I certify that all the above information on this student's application form is true and correct to the best of my knowledge

Parent's Signature

Date

RECEIVED BY:
CLP representative's INITIALS: _____



Date: _____

Dear Parent,

Peace! Thank you for your interest in Create and Learning Paths School as a school of choice for your child. Allow us to share with you some procedures for Enrollment which you ought to know.

We recommended that one or both parents visit the school to learn more about the programs, see the facilities, and observe the daily routines. It is a must that a school administrator or head teacher tell you about the school's philosophy and teaching practices. It is also vital that you share with us your own beliefs about parenting and schooling. Full disclosure of the child's diagnosis/special needs/issues/concerns if any will enable us to help and understand your child's needs in order to ensure your child's success.

The completed application must be accompanied by a one-time application fee of P 500 in order to have the child evaluated for possible placement and enrollment. **This fee is non refundable.**

Applicants who have had school experience are required to have one recommendation form completed by a current teacher and an administrator before they may be fully considered for matriculation. Kindly request for the recommendation forms from CLP.

Prospective students will be scheduled for baseline assessment/school visit. The visit permits your child to experience our unique program, and concurrently affords our faculty the opportunity to evaluate your child for future placement.

CLP School has an ongoing enrollment policy during the school year; a student may be admitted mid-year only if space is available and if the student's requirements are complete.

The completed application form, recommendation, etc., are solely for the purpose of evaluation of your child; the required application paperwork does not reserve a space for your child. Once you have been notified of acceptance, you have to make a reservation payment so that a space will be reserved for your child in the appropriate class.

Thank you,

CLP ADMIN

Quick Checklist for Parents

Paperwork and deposit for enrollment evaluation:

Completed application form

____ 500 application fee (non-refundable)

____ Recommendation from former school from the teacher and administrator if applicable

____ Former School records , Therapy reports or evaluations/diagnosis /referral from Developmental Pediatrician/Neurodevelopmental Psychologists or other medical specialists.

____ Documents to submit

Birth Certificate, Certificate of Legal Adoption (if applicable)

Medical Certificate

Report Card from school last attended, if applicable

Alien Certificate of registration (for non Filipino parents and students)

____ one ID picture (1x1)

____ Attendance in the parent's orientation (to be scheduled): _____

____ Baseline assessment (to be scheduled) : _____

