

If your child attended school, play 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. History of Child

BIRTH

Mother's pregnancy: ___ illness ___ Surgery ___ Accident ___ other complications

Were Medications taken during pregnancy? : ___ If yes, what for? _____

Birth was ___ Full term ___ Premature ___ Overdue ___ Normal ___ Caesarean ___ Forceps

Is there history of learning problems/developmental delays /issues in the family? ___ Yes ___ No

IV. 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: _____

V. DEVELOPMENTAL

Receptive Language Skills ¹	Age Expected	Age acquired
Localizing to sound (turning to direction of sound source)	1:00	
Localizing to voice/name calling (turning to direction of the speaker)	2:00	
Recognizing names of familiar people and object	3:00	
Following simple commands	2:00	
Answering simple questions (yes or no questions)	3:00	

Motors Skills ²	Age Expected	Age Acquired
Crawling	0:7	
Sitting alone	0:7	
Standing alone	0:7-1:0	
Walking alone	1:0	
Feed Self	1:0	
Dress	3:0-5:0	

Expressive Language Skills ¹	Age Expected	Age Acquired
Cooing	0:2-0:3	
Babbling	0:4-0:6	
Imitated adult sounds	0:6- 1:0	
First word (specific)	1:00	
2-word utterances	1:6-2:00	
Phrases/sentences	3:00	

References:

¹Language Development: An Introduction (Owens, 1983)

²Brigance Diagnostic Inventory of Early Development

VI. 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. Or _____i/we believe routine should be flexible and allows for a lot of changes according to our own activities (parent's work /career)

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:

_____ spanking _____ time out _____ face the wall _____ explaining why it is wrong

_____ none, because they are too young to understand discipline

For each of the ff. pairs of statements, choose the more dominant statement to describe your beliefs:

_____ 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 immersed in academic work as early as possible.

_____ 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 as early as possible.

_____ I/We believe peace and socio-civic issues are too abstract for the young child.

_____ I/We believe it is necessary for young children to learn about ways to save the environment.

_____ I/We believe caring for the environment is still too difficult for our/my child to process.

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 methods. 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

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) : _____

