ENROLLMENT FORM

U.S. COLLEGE PREPARATORY SCHOOL DIPLOMA

VERMONT ACADEMY in partnership with LICEO EUROPEO

Date:					
Grade:	9 th Grade:	10 th Grade:	11 th Grade:	12 th Grade:	
STUDEN	NT INFORMATI	ON			
First Naı	me:				
Last Nar					
Date of Birth:		Place of Birth:	Home/Native Language:		
D Number:					
Name/C	ity/Country of th	e last School:			
HOME A	ADDRESS				
Street na	ame, house nun	nber:			
City:		Zip Code:	Province/State:		
Home Phone Number:		Cell Phone Number:			
FATHER	R/GUARDIAN IN	NFORMATION			
Name aı	nd Last Name:				
ID Numb	per:				
Home Phone Number:			Cell Phone Number:		
Email Ad	ddress:				
MOTHE	R/GUARDIAN I	NFORMATION			
Name aı	nd Last Name:				
ID Numb	oer:				
Home Phone Number:			Cell Phone Num	ber:	
Email Ad	ddress:				





MEDICAL EMERGENCY INFORMATION Medical Emergency Information is required. If parents/guardians cannot be reached, please call: Name and Last Name: Phone Number: **SPECIAL EDUCATION NEEDS** Does your kid have any learning difficulty or disability? Yes No Has the student been diagnosed, or do you believe that the student has a condition which may affect his/her learning process (dyslexia, dysgraphia, ADD / ADHD among others) or any emotional or psychological diagnosis the school should know about? Please, provide documents and further information on any of your concerns below.





APPLICANT EDUCATION INFORMATION Current School Name: Current School Type Current Grade: Dates of Attendance: Grades Attended: School up to Grade Level **Current School Address** School Phone Number School Head of Counselor Name SIBLING INFORMATION **INTEREST OR ACTIVITY** Interest Category: Activity: Years of Experience Hours per Week: Level of Involvement: Position Held: Continue at Future School: **ACADEMICS OR PERSONAL ACHIEVEMENTS MULTIMEDIA LINKS**

Name/Signature of Father/Guardian: Name/Signature of Mother/Guardian:



ENROLLMENT FORM - TEACHERS

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RECOMMENDATION QUESTIONS

When did you teach your student?
How well do you know your student?
How large is/was your class?
What course(s) did you teach this student?
Student's current average, grade, or mark in the course
Briefly describe your course listing the texts authors studied
Are the students grouped by ability?
How well does the student accept advice/criticism?
How accurately does the student understand material that has been read?
How well does the student write on comparison with other students whom you have taught?
Next year, what course would be the most appropriate placement for this student?
STUDENT CHARACTERISTICS

Name/Signature of Math or Science teacher:



RECOMMENDATION QUESTIONS When did you teach your student? How well do you know your student? How large is/was your class? What course(s) did you teach this student? Student's current average, grade, or mark in the course Briefly describe your course listing the texts authors studied Are the students grouped by ability? How well does the student accept advice/criticism? How accurately does the student understand material that has been read? How well does the student write on comparison with other students whom you have taught? Next year, what course would be the most appropriate placement for this student?

Name/Signature of English or History teacher:

STUDENT CHARACTERISTICS



EVALUATION SUMMARY

How does the student's overall performance compare to that of other students in the grade level?
What words come to mind when describing this student?
Have you had the opportunity to interact with the student's parent(s)/guardian(s)?
Please provide any additional information that will give us a more complete picture of the student
Name/Signature of teacher/counselor:
Name/Signature of teacher/counselor.

