



PEPIN ACADEMIES

Prospective Student Application

Pepin Academies – Pasco County:

- Elementary – Grades 3rd – 5th
- Middle School – Grades 6th -8th
- High School – Grades 9th – 10th (11th to be added 2015-16; 12th to be added 2016-17)

Pepin Transitional – Pasco County:

- Pepin Transitional – Post Secondary 18-22 yrs. old (to be added 2015-16)
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THE ADMISSION PROCESS: The Pepin Academies, Inc. admits students of any race, color, creed, or national origin. Students must have learning or learning related disability. Students with pervasive processing and language difficulties and with achievement scores significantly below expected grade level are especially encouraged to apply.

For **ALL** applications, the following documents must be submitted **WITH** the application or the application will not be reviewed by the admissions committee.

Application for Admissions: COMPLETELY fill out the application or it will NOT be reviewed. For items that are not applicable, please indicate it by writing “N/A” in the space provided. **NOTE: INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED!**

Testing: Copies of **ALL** psychological tests/evaluations and any social work reports **MUST** be submitted along with the application.

Individualized Education Plans (IEP’s): A copy of the **MOST RECENT** as well as copies of any prior IEP must be submitted along with the application.

Educational Records: Copies of the **MOST RECENT** report card and copies of any standardized test scores must be submitted along with the application.

Interview/Evaluation: Once the requested information (noted above) has been received, the admissions committee will review the file to determine the next step in the admission process – the on-campus interview. This interview/evaluation is a requirement for all applicants. Parents/Guardians of the applicant will be contacted to schedule an appointment.

NOTE:

- 1. If an applicant is admitted to The Pepin Academies, Inc., additional documents may be required.**
- 2. If an application is accepted and an applicant resides outside Hillsborough County, a waiver MUST be received from the appropriate county before the applicant can be enrolled at Pepin Academies.**
- 3. Should your child not be accepted to Pepin, you withdraw your application, or you choose NOT to be placed on the “waiting list”, your application will be destroyed in a manner appropriate for private documents.**

PLEASE PRINT ALL INFORMATION

Date: _____ Present Grade: _____

Full Name of Applicant: _____

LAST

FIRST

MIDDLE

Home Address: _____

Street

City, State

Zip code

Date of Birth: _____

mm/dd/yy

Gender: M F

Social Security Number: _____ Student Lives With: _____

County of Residence: _____

Name of Parent/Guardian: _____

Home Phone Number: () _____ Cell Phone Number: () _____

FAX Number: () _____ Email Address: _____

Home Address: _____

Street

City, State

Zip code

Employed by: _____ Position: _____

Business Address: _____

Street

City, State

Zip code

Business Phone Number () _____

Name of Parent/Guardian: _____

Home Phone Number: () _____ Cell Phone Number: () _____

FAX Number: () _____ Email Address: _____

Home Address: _____

Street

City, State

Zip code

Employed By: _____ Position: _____

Business Address: _____

Street

City, State

Zip code

Business Phone Number () _____

Who will be responsible for school fees (ex. field trips)? _____

Correspondence and reports sent to which address? _____

How did you learn about The Pepin Academies, Inc.? _____

Present School Name: _____

School Address: _____
Street City, State Zip code

Contact at present school: _____
Name Phone

Grade applying for: _____ School Year: _____

List ALL schools applicant previously attended:

<u>School Name</u>	<u>Address</u>	<u>Phone Number</u>

What special education program(s) is your child enrolled in or has been enrolled in? (ex., SLD, Speech, Language, etc. Please refer to your child's IEP.)

What do you hope for your child to get/achieve at Pepin that your child has not been able to get/achieve in their current placement? (Please use a separate sheet if necessary.)

Has the applicant ever been retained a grade: _____ If yes, what grade: _____

Date of applicant's more recent educational diagnostic testing: _____

Diagnosis/Findings: _____

Please list any physical limitations of your child:

Does your child have any difficulties with vision, hearing or speech?

Is your child currently being seen by a psychologist or psychiatrist? _____

If yes, please give the name and address:

Is your child taking any medications? If so, what for and how often?

Does your child receive any outside therapies and with whom (counseling, OT, PT, Speech)?

Has your child ever been involved with the juvenile justice system? If so, does he/she have a probation officer? Please list name and phone number.

Has your child ever been:

_____ Suspended _____ Expelled _____ Withdrawn from school

Explain the circumstances: _____

Please note any family circumstances that would be helpful for us to know (i.e. adoption, family illness, parenting arrangements, etc.) Use separate sheet if necessary:

If applicable, please list a hobby/service/trade, you may be able to contribute with to the school as a volunteer (i.e. painting, lawn service, plumbing, web design, IT, electrical, etc.):

Please choose where you would prefer to volunteer:

- | | |
|--|---|
| <input type="checkbox"/> Annual Gala Dinner/Guest | <input type="checkbox"/> Lunch duty |
| <input type="checkbox"/> Speaker, Fundraiser | <input type="checkbox"/> Skills Lab assistance |
| <input type="checkbox"/> Homeroom mom/dad | <input type="checkbox"/> Pepin F.I.R.S.T. (Parent Organization) |
| <input type="checkbox"/> Tutoring | <input type="checkbox"/> Bulletin Boards |
| <input type="checkbox"/> Sports assistance | <input type="checkbox"/> Art/Crafts |
| <input type="checkbox"/> Celebration (award Ceremonies, birthdays, etc.) | <input type="checkbox"/> Share skills with students |
| <input type="checkbox"/> Obtaining community or Business donations | <input type="checkbox"/> Afternoon sales |
| <input type="checkbox"/> Field Trips | |

HOW WOULD YOU DESCRIBE YOUR CHILD? (Check all that apply)

Reading

Does your child:

- Have difficulty sounding out words
- Have difficulty reading quickly and easily
- Have difficulty understanding words they read
- Have difficulty answering literal comprehension questions (answers that can be found directly in the story)
- Have difficulty answering inferential comprehension questions (answers where you have to “put the pieces together”)
- Enjoy reading books independently
- Enjoy listening to stories

Other comments: _____

Writing

Does your child:

- Have poor/illegible handwriting
- Have poor pencil grip
- Dislike the act of handwriting (tires easily, complains of pain, etc)
- Have poor spelling
- Have difficulty planning what to write/come up with ideas
- Have difficulty with organizing ideas
- Have difficulty elaborating (writes simple sentences)
- Have difficulty with conventions (capitalization, punctuation)
- Enjoy creative writing

Other comments: _____

Math

Does your child:

- Have difficulty completing computation without the use of a calculator
 - Addition
 - Subtraction
 - Multiplication
 - Division
- Have difficulty with money recognition (ex. a quarter is 25 cents)
- Have difficulty counting/combining money (ex. 3 dimes is 30 cents)
- Have difficulty with time
 - Telling time
 - Determining how much time has passed
- Have difficulty with geometry
 - 2D shape recognition
 - 3D shape recognition
- Have difficulty with measurement
 - Using a ruler
 - Recognizing units of measurement
- Have difficulty with algebraic concepts
 - Using order of operations
 - Solving equations
- Have difficulty solving word problems
- Read and interpret charts and graphs
- Enjoy math

Other comments: _____

Social Emotional

Does your child:

- Have many friends
- Have difficulty with peer relations
 - Isolates themselves
 - Difficulty working in groups
- Have difficulty with conflict resolution
 - Argues with peers
 - Uses inappropriate language
 - Enters/initiates fights
 - Teases others
- Have difficulty handling disappointment.
 - Inappropriate outbursts
 - Temper tantrums
- Have difficulty with adult relationships
 - Argues with adults
 - Defies adults
 - Uses inappropriate language
- Have difficulty self-advocating
 - Asking for assistance
 - Stating his/her needs
 - Making the right choice when others are making the wrong choice.

Perseverate on topics. Explain _____

Have concerns that may warrant counseling. Explain _____

Other comments: _____

Independent Functioning

Does your child:

- Have difficulty completing work independently
 - Due to ability
 - Due to motivation
 - Due to difficulty with focus
 - Require prompting to pay attention when given directions
 - Have difficulty handling changes in routine
 - Have difficulty with time management
 - Have difficulty completing work on time
 - Have difficulty turning in work/papers on time
 - Getting to places on time
 - Taking a long time to complete simple tasks
 - Have difficulty with memory
 - Short term
 - Long term
 - Processing difficulties
 - Visual
 - Auditory
 - Test taking skills
 - Studying for tests
 - Taking tests
 - Test anxiety
 - Organization
 - Putting things where they belong
 - Getting planner/forms signed
 - Using planner as an organizational tool
 - Special accommodations (ex. sensory accommodations, accommodations for handwriting, accommodations for hearing or vision, etc.)
-

Communication

Receptive Language

Does your child:

- Have difficulty understanding grade/age appropriate vocabulary
- Have difficulty understanding what she/he is told to do/requires repetition
 - One step directions
 - Multi-step directions

Expressive Language

Does your child:

- Have difficulty using grade/age appropriate vocabulary when speaking
- Have difficulty finding the right words quickly and easily to express themselves
- Have difficulty expressing thoughts/ideas in complete sentences (ex. uses fragments or one word responses)
- Have difficulty using correct grammar when speaking

Pragmatic Language

Does your child:

- Have difficulty interpreting the feelings of others
 - Recognizing facial expressions
 - Recognizing body language
 - Demonstrating empathy
- Have difficulty with humor
 - Using humor appropriately
 - Understanding humor

- Difficulty selecting age appropriate topics for discussion
- Difficulty participating in the give and take of conversation
- Difficulty maintaining personal space
- Difficulty using appropriate volume/rate
 - Too soft Too loud Too fast Too slow
- Difficulty speaking to adults differently than peers
- Difficulty maintaining eye contact

Other

How does your child best learn?

- Visually Auditorily Hands-on

What are your child's hobbies/interests? _____

ENROLLMENT AGREEMENT:

I desire to enter my son/daughter as a student at The Pepin Academies, Inc., subject to the prevailing rules and regulations of Pepin Academies. Pepin Academies reserve the right to place a student at the academic level and in the courses it determines best meet individual student needs. Additionally, Pepin Academies may terminate any association with any student if it determines that such association is incompatible with the aims, purposes, and best interests of the school.

Signature: _____ Date: _____

Relationship to applicant: _____ Date: _____

Signature of applicant: _____ Date: _____

~ Please include photos of your child ~

Mail, Fax or Hand Deliver to:

For Pasco County Campus:
 Pepin Academies – Pasco County
 9804 Little Rd.
 New Port Richey, FL 34654
FAX: 727-233-2963

(For any questions or info, our Phone number is: (727) 233-2961.)

Pepin Academies Acceptance Process: If it is deemed the student is eligible under the school's mission, the applicant's application is then taken to the acceptance committee comprised of the administrative team. Once approved, all applicants will be notified of their acceptance or non-acceptance. All eligible students will be enrolled unless the number of applications exceeds the capacity of a program, class, grade level, or building. When all original slots are full, a "waiting list" will be created and all applicants shall have an equal chance of being admitted through a random selection process. Eligible applicants will be placed in a lottery based on grade level openings and class size reduction requirements. Applicants will be picked until all available seats are filled.