

PERMISSION FOR SCHOOL TO RELEASE STUDENT RECORDS

To Spanish River Christian School, 2400 Yamato Road, Boca Raton, Florida 33431

Name of Applicant _____ Kindergarten (age 5) First Grade

The form below is to be completed by the Teacher, Administrator, or Guidance Counselor of your child's most recent school. The Committee on Admission cannot act until this information has been received. The school will mail this form and supporting materials directly to Spanish River Christian School. A parent cannot "hand carry" this form to Spanish River Christian School. It will be used only for the admission process and will not become part of the student's permanent record at Spanish River Christian School.

In order to allow the candidate to be considered, I/we authorize the release of my/our child's academic record, other test data, and recommendation as requested below by Spanish River Christian School. I/We hereby authorize Spanish River Christian School to contact school and other sources to obtain information to support this application and I/we will not seek access to confidential recommendation and evaluation materials before or after the admission decision is made. I/We release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to Spanish River Christian School for that purpose. At a later time, if acceptance is offered by Spanish River Christian School, I/we authorize the release of the full student record file when my/our child transfers.

Date _____ Signatures of _____
Both Parents/Guardians _____

Receiving School May Detach and Retain Upper Portion as Record of Parent Permission

SPANISH RIVER CHRISTIAN SCHOOL RECOMMENDATION FOR ADMISSION TO KINDERGARTEN AND FIRST GRADE ONLY

Name of Applicant _____ Kindergarten (age 5) First Grade

This child is seeking admission to Spanish River Christian School, a Christian school offering an academic program in preschool through eighth grade. We educate the whole child spiritually, socially, and academically under the Lordship of Jesus Christ. **Please complete this form to assist the members of our Committee on Admission.** If you wish to discuss this student personally rather than complete this form, please check here , sign the form at the bottom, and note your telephone number. The Director of Admissions or the Headmaster will call you.

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|---|--|----------|----------|----------|
| Would you please check the response that best describes the current level of applicant's achievement in these areas: O = outstanding for special effort and achievement; S = satisfactory progress consistent with ability or age, and N = needs improvement or more effort if progress is to be consistent with ability or age. Your written comments may be continued on the back of this form. | | | | |
| WORK HABITS | | O | S | N |
| Your comments: _____ | 1. Follows directions | | | |
| _____ | 2. Completes tasks on time | | | |
| _____ | 3. Works carefully and neatly | | | |
| _____ | 4. Is attentive and listens carefully | | | |
| _____ | 5. Is able to copy designs | | | |
| _____ | 6. Works independently | | | |
| _____ | 7. Shows initiative or self-motivation | | | |
| SOCIAL READINESS | | | | |
| Your comments: _____ | 1. Respects property of others | | | |
| _____ | 2. Works well with others | | | |
| _____ | 3. Carries out responsibilities | | | |
| EMOTIONAL GROWTH | | | | |
| Your comments: _____ | 1. Adjusts to new situations | | | |
| _____ | 2. Exhibits courtesy and respect | | | |
| _____ | 3. Shows self-confidence | | | |
| _____ | 4. Shows respect for adults | | | |
| _____ | 5. Exhibits self-control in classroom | | | |
| _____ | 6. Exhibits self-control on playground | | | |
| _____ | 7. Follows classroom rules | | | |

Does your school give periodic report cards? Yes No If yes, please attach a copy of the most recent report to parents.

How would you consider the applicant's parents? Very cooperative Usually cooperative Rarely cooperative

Rather disinterested Never had any communication with them.

If your school is private, does the family meet its financial responsibilities for school bills on time? Yes No Not Applicable

How would you compare applicant's academic potential to others whom you have observed in similar circumstances?

Below average Fair Average Above average Excellent Outstanding

How would you rank applicant's academic performance in his/her class? Top third Middle third Bottom third

Does your school make any accommodations for this student? Yes No If yes, please explain: _____

_____ Number of students in the class: _____

Please use the back of this form to write additional comments. If you do not wish to complete form, please sign and note your telephone number and email address. You will be contacted.

Date _____ Signature _____ Title _____

Printed Name (Mr., Mrs., Miss., Ms., Dr.) _____

School _____ Phone Number and Area Code _____

School Address _____ City _____ State _____ Zip _____

Teacher's e-mail address _____

After completion, please mail to Director of Admissions, Spanish River Christian School, 2400 Yamato Road, Boca Raton, Florida 33431. The school telephone number is (561)994-5006 and FAX number is (561)994-1160.

IMPORTANT REQUEST:

Please use this space to write your estimate of the applicant's possible success at, and contribution to, Spanish River Christian School. You are encouraged to comment candidly on these characteristics of the applicant that seem to you to distinguish him or her from other students with whom you have been associated. Illustrate by example when appropriate, is the candidate's record with your school a true index of ability, or have outside circumstances interfered with academic achievement? (For example: illness, excessive absences, difficult home situation.) What suggestions can you give Spanish River Christian School to help this student be successful and happy?

Thank you for your time and effort in evaluating this student and assisting both the applicant and Spanish River Christian School.

Mrs. Cheryl Burdin
Headmaster
Office Telephone: (561)994-5006
Office FAX: (561)994-1160

Student's Name _____

Teacher's Signature _____ Title _____ Date _____

Printed Name _____ School Name _____

School Address _____ City _____ State _____ Zip _____

Phone and Area Code _____ Please indicate best time to call _____

E-mail Address _____

In what capacity have you known the applicant? _____ Length of acquaintance _____

After completion of both sides of this form, please mail to Director of Admissions, Spanish River Christian School, 2400 Yamato Road, Boca Raton, Florida 33431.