



Date sent: \_\_\_\_\_

Date received: \_\_\_\_\_

## REQUEST FOR ADMISSION HIGH SCHOOL LEVEL

**School information sheet to be completed by classroom Teacher and/or Special Education Specialist**

NAME OF STUDENT: _____	
ADDRESS: _____	
PERMANENT CODE: _____	DATE OF BIRTH: _____
DIFFICULTY CODE: _____	CURRENT PLACEMENT: _____
FATHER'S NAME: _____	TELEPHONE : _____
	HOME WORK
MOTHER'S NAME: _____	TELEPHONE: _____
	HOME WORK

SCHOOL BOARD: _____	TELEPHONE: _____
SCHOOL: _____	TELEPHONE: _____
ADDRESS: _____	
PRINCIPAL: _____	TEACHER: _____
SPECIAL EDUCATION SPECIALIST: _____	
APPLICATION FOR ADMISSION TO VANGUARD WAS INITIATED BY:	
PARENTS <input type="checkbox"/>	_____
SCHOOL / SCHOOL BOARD <input type="checkbox"/>	_____
	NAME, POSITION, TELEPHONE NUMBER
OTHER <input type="checkbox"/>	_____
	NAME, POSITION, TELEPHONE NUMBER
REASONS FOR REFERRAL: _____	
_____	

## ACADEMIC HISTORY SERVICES RECEIVED

CLASSIFICATION	
R	Regular
S.C	Special Class
R.C	Resource Class
E	English
F	French

YEAR	SCHOOLS ATTENDED (Begin with present year)	Grade level	Lang. of instruction		Type of class			Support Services					
			E	F	R	S.C.	R.C	Free flow	Social. worker	Speech. lang	Psycho	Other	
20__-20__													
20__-20__													
20__-20__													
20__-20__													
20__-20__													
20__-20__													

### PROFESSIONALS CURRENTLY INVOLVED WITH STUDENTS AND THEIR ROLES

NAME	ROLE	ADDRESS AND TEL. NUMBER

# ACADEMIC REVIEW

<b>I ORAL LANGUAGE SKILLS</b>
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MOTHER TONGUE \_\_\_\_\_

OTHER LANGUAGES SPOKEN AT HOME \_\_\_\_\_

**1. EXPRESSIVE LANGUAGE**

Describe the student's expressive language (fluency, precision, organization, etc.):

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**2. RECEPTIVE LANGUAGE**

Describe the student's receptive language:

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<b>II READING SKILLS</b>
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**1. LEVEL OF LEARNING:**

Have there been any reading tests administered to the student recently?

<b>TEST</b>	<b>DATE</b>	<b>TEACHER'S EVALUATION</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**2. TEXT COMPREHENSION:**

Please comment on how the student handles texts, student's decoding ability, student's strategic use of cues and student's comprehension of text:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**3. WHAT MATERIALS WERE USED THIS YEAR?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4. ANY ADDITIONAL COMMENTS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>III WRITING SKILLS</b>
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**1. LEVEL OF LEARNING:**

Have there been any tests administered to the student concerning written production?

<b>TEST</b>	<b>DATE</b>	<b>TEACHER'S EVALUATION</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**2. WRITTEN PRODUCTION**

Please comment on mechanics and content of student's written production:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**3. KNOWLEDGE OF SPELLING:**

Have there been any spelling tests administered to the student?

<b>TEST</b>	<b>DATE</b>	<b>TEACHER'S EVALUATION</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4. HANDWRITING**

Please comment on student's handwriting and word processing skills:

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**5. WHAT MATERIALS WERE USED THIS YEAR?**

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**6. ANY ADDITIONAL COMMENTS:**

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<b>IV MATHEMATICS</b>
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**1. ACTUAL GRADE LEARNING:**

Have there been any Mathematic tests administered to the student recently?

<b>TEST</b>	<b>DATE</b>	<b>TEACHER'S EVALUATION</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**2. STRENGTHS AND WEAKNESSES**

Please comment on the student's level, strengths and weaknesses in following areas:

Numeration: \_\_\_\_\_

\_\_\_\_\_

Operations \_\_\_\_\_

\_\_\_\_\_

Measurement \_\_\_\_\_

\_\_\_\_\_

Geometry \_\_\_\_\_

\_\_\_\_\_

Fractions \_\_\_\_\_

\_\_\_\_\_

Numbers with decimals \_\_\_\_\_

\_\_\_\_\_

**3. PROBLEM SOLVING**

Understanding of problems: \_\_\_\_\_

\_\_\_\_\_

Choice of operation(s): \_\_\_\_\_

\_\_\_\_\_

Organization of the equation: \_\_\_\_\_

\_\_\_\_\_

**4. WHAT IS THE STUDENT'S ATTITUDE TOWARD MATHEMATICS?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5. WHAT APPROACHES HAVE BEEN USED THIS YEAR? WHAT WERE THE RESULTS?**

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**6. WHAT MATERIALS WERE USED THIS YEAR?**

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**7. ANY ADDITIONAL COMMENTS:**

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V BEHAVIOUR EVALUATION
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**1. PLEASE COMMENT ON STUDENT'S SELF-CONTROL OF BEHAVIOR AND ATTENTION, WORK HABITS, STRENGTHS AND NEEDS.**

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**2. PLEASE COMMENT ON STUDENT'S COPING SKILLS, MATURITY AND SOCIAL COMPETENCE.**

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**3. HOW CONFIDENT AND STRATEGIC IS THIS STUDENT?**

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**4. WHAT RECOMMENDATION WOULD YOU MAKE TO IMPROVE THIS STUDENT'S BEHAVIOUR?**

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**Please enclose a copy of student's English eligibility certificate.**

NAME OF THE PERSON COMPLETING QUESTIONNAIRE: _____	
POSITION: _____	TELEPHONE NUMBER: _____
SIGNATURE: _____	DATE: _____

**RETURN THIS FORM TO:**

VANGUARD SCHOOL  
Responsible of Admissions - High School Level  
5935 chemin de la Côte-de-Liesse  
Saint-Laurent, QC H4T 1C3