





STUDENT INFORMATION		
Name:		
Grade:		
Age:	Date of birth:	
Nationality:		
Address:		
State:	ZIP Code:	
PARENT INFORMATION		
Name 1:		
Phone number:	Mobile number:	
Profession:		
Name 2:		
Phone number:	Mobile number:	
Profession:		

PARENT SPECIAL INFORMATION OBSERVATIONS AND COMMENTS

Status, if family lives together, separated, step-parents, adoptions, etc.







SIBLINGS AND FAMILY MEMBERS	
Sibling name:	Age:
Sibling name:	Age:
Sibling name:	Age:
Other members within the household (Specify relations	ship with student)
LANGUAGE	S SPOKEN
Native Language:	
List any other languages spoken fluently by the studen	nt:
LANGUAGE	S SPOKEN
List any hobbies or extracurricular activities the studen	it is involved in:

HABITS

Provide information on the student's social, eating, and sleeping habits:







SOCIAL DEVELOPMENT

Provide information on the student's relationships with peers and their ability to adapt to differnt scial situations:

FAMILI LIFE

Provide information on the student's family life and any significant events or circumstances that may have an impact on their education:

LEARNING STRENGTHS

Provide information on the student's strengths in learning, such as areas where they excel academically or in specific subjects:

OPPORTUNITY AREAS

Provide information on any areas where the students may need additional support of opportunities for growth:

ACADEMIC HISTORYV

Provide information on the student's academic history, including any previous schools attended and their performance in those schools:







EMOTIONAL AREA

Provide information on how the students copes with pressure and what their emotional strengths and weaknesses:

COMMENTS AND OBSERVATIONS

Are there any additional comments or observations that may be relevant to the student's education?

MEDICAL INFORMATION

List any known medicat conditions or allergies that the student has, as well as any relevant medical information that the school should take into account:

SPECIAL NEEDS

Indicate if the student has any special needs, such as learning disabilities or physical limitations, and provide any relevant information or documentation

DISCIPLINARY HISTORY

Provide information on any disciplinary actions or incidents involving the student in previous schools or outside of school







GOALS

Provide information on the student's academic and personal goals for their time in high school:

HOME LIFE

Provide information on the student's home life and any support systems or resources available to them:

TECHNOLOGY ACCESS

Indicate if the student has access to a computer and internet al home, as well as any other technology resources available to them:

NATURE ACCESS

Indicate if the student has access to outdoor exposure at home, as well as any other natural resources available to them:

EMERGENCY CONTACT INFORMATION

Please provide an emergency contact in case the student's parents or guardians cannot be reached: Name 1:	