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# LAM Christian Academy

## GETTING TO KNOW YOUR STUDENT

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The following information remains confidential and is used to help your child reach their greatest potential.

Student's Name: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Was your student born premature? \_\_\_ Yes \_\_\_ No – If yes, how many weeks? \_\_\_\_\_

Name of most recent school your student attended: \_\_\_\_\_

If not LAM, please explain the reason for leaving: \_\_\_\_\_

If previously home schooled, please list curriculum and grade level:  
\_\_\_\_\_

What are the strong points of your student's character?  
\_\_\_\_\_

What are your goals for your student for this school year?  
\_\_\_\_\_

What are the areas of needed growth or improvement for your student?  
\_\_\_\_\_

Does your student have any educational concerns? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student ever received special help or tutoring? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student ever repeated or skipped a grade for any reason? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student ever been referred for testing or placed in a special program? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student ever seen a counselor/doctor/psychiatrist/psychologist for any type of social behavior, mental or emotional issues? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Do you suspect or have you been told that your student might have a learning disability, such as dyslexia? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

When was your child's last hearing test? \_\_\_\_\_ When was your child's last eye exam? \_\_\_\_\_

Has your child had vision problems (i.e. glasses/patch)? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Is there a parent or sibling with a history of learning disabilities? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student received any special honors or awards for scholastic achievement? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

Has your student ever been suspended, expelled, or disciplined beyond the ordinary? \_\_\_ Yes \_\_\_ No  
If yes, please explain: \_\_\_\_\_

**PLANNING:** Please share a little about your own education and your future plans regarding your child's education.

I plan for my child to attend LAM through: \_\_\_ *Lamb* \_\_\_ *Pre-K* \_\_\_ *Bridge* \_\_\_ *K* \_\_\_ *1<sup>st</sup>* \_\_\_ *2<sup>nd</sup>* \_\_\_ *3<sup>rd</sup>* \_\_\_ *4<sup>th</sup>* \_\_\_ *5<sup>th</sup>*

If you do not plan on staying at LAM, what are your plans for elementary school? \_\_\_ Charter \_\_\_ Magnet \_\_\_ Private \_\_\_ Public  
What is the name of the school you are considering? \_\_\_\_\_

What are your plans for middle school? \_\_\_ Charter \_\_\_ Magnet \_\_\_ Private \_\_\_ Public  
What is the name of the school you are considering? \_\_\_\_\_

What are your plans for high school? \_\_\_ Charter \_\_\_ Magnet \_\_\_ Private \_\_\_ Public  
What is the name of the school you are considering? \_\_\_\_\_

Do you plan for your child to attend college? \_\_\_ Yes \_\_\_ No

Has either \_\_\_ *mother* or \_\_\_ *father* attended private school? If so, what grades? \_\_\_\_\_

**HOUSEHOLD INFORMATION:** Does your student live in a split household? \_\_\_ Yes \_\_\_ No - If no, please skip to the next section.

If yes, please list adults in Household #1: \_\_\_\_\_

Describe the days and hours in Household #1: \_\_\_\_\_

If yes, please list adults in Household #2: \_\_\_\_\_

Describe the days and hours in Household #2: \_\_\_\_\_

Sibling Name(s)	Age/Grade	Primary/Secondary Residence	School Attending

**We can better assist in educating your child with as much information as possible.  
Please provide any additional information that you feel may be beneficial for us to know.**

Name of person completing this form: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_