

Application for Enrollment at The STABLES



...built on core family values to empower, encourage and achieve dreams... together.

STUDENT FORM (Student to fill out)

Student Name _____
Last First MI

Student ID: _____

Date of Birth _____ Age: _____ Gender: _____

Current School: _____

Please check all that apply;

- | | |
|---|---|
| <input type="checkbox"/> I do not feel challenged in my current classes | <input type="checkbox"/> I have trouble staying on task |
| <input type="checkbox"/> I struggle to understand the information in my current classes | <input type="checkbox"/> I often struggle to manage my anger |
| <input type="checkbox"/> I sometimes use physical aggression when I am angry | <input type="checkbox"/> I feel overwhelmed |
| <input type="checkbox"/> I am currently employed | <input type="checkbox"/> I am very respectful |
| <input type="checkbox"/> I make friends easily | <input type="checkbox"/> My teachers believe in me |
| <input type="checkbox"/> I can do anything I want if I put my mind to it | <input type="checkbox"/> I want to attend college |
| <input type="checkbox"/> I believe in myself | <input type="checkbox"/> I have a plan for what I will be doing
in ten years |

Student Statements:

Please answer all questions with complete sentences on a separate sheet of paper

- 1.) Do you feel successful in your current school? Why/Why not?
- 2.) What expectations do you have of yourself? What do you expect from teachers?
- 3.) What are your goals and dreams? Why do you believe The Stables will help you achieve them?

Student Signature _____

Date: _____

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Parent/Guardian Form

Parent/Guardian Information

Name _____
Last First MI

Relationship to applicant: Parent Grandparent Other _____

Address: _____

Home Phone _____ - _____ - _____

Cell Phone _____ - _____ - _____

Work Phone _____ - _____ - _____

Email _____

Please check all that apply to your student;

Does not feel challenged in current school

Is Respectful

Struggles to understand material in most classes

Makes friends easily

Sometimes has trouble concentrating on tasks

Teachers Believe in the student

Has difficulty managing anger

Can do anything they set their mind on

Uses physical aggression when angry

Wants to attend college

Feels overwhelmed

Belives in self

Parent/ Guardian Statements:

Please answer on a separate sheet of paper.

- 1). Please explain why you feel your student will be successful at The Stables
- 2). What interventions/ services has helped your student and what level of success did they achieve?
- 3). Please share any additional information you feel would be helpful in assessing the student applicant

Parent/Guardian Signature _____ Date: _____

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Teacher Form

Student Name: _____
Last
First
Middle

Current School: _____

Teacher Name: _____ Course Taught: _____

Teacher Checklist

Please check the box that best describes the student:

Cooperation and Attitude	<input type="radio"/> Uncooperative and resents authority	<input type="radio"/> Reluctant to cooperate. Accepts authority with resistance	<input type="radio"/> Cooperative and accepts authority	<input type="radio"/> Always cooperative and accepts authority well	<input type="radio"/> Stimulates cooperation and understands the need for authority
Attitude Toward Learning	<input type="radio"/> Resists	<input type="radio"/> Accepts under pressure	<input type="radio"/> Accepts if perceives an advantage	<input type="radio"/> Willingly accepts	<input type="radio"/> Constantly seeking additional learning
Problem Solving	<input type="radio"/> No ability	<input type="radio"/> Limited ability	<input type="radio"/> Average	<input type="radio"/> Resourceful	<input type="radio"/> Exceptional
Interest and Enthusiasm	<input type="radio"/> Totally disinterested	<input type="radio"/> uninterested	<input type="radio"/> Varying interest	<input type="radio"/> Moderately Interested	<input type="radio"/> Very interested
Initiative	<input type="radio"/> Never initiates	<input type="radio"/> Waits for others	<input type="radio"/> usually initiates	<input type="radio"/> frequently initiates	<input type="radio"/> Self-reliant
Responsibility	<input type="radio"/> Unreliable	<input type="radio"/> Somewhat reliable	<input type="radio"/> Usually dependable	<input type="radio"/> Dependable	<input type="radio"/> Very Dependable
Work Ethic	<input type="radio"/> Careless	<input type="radio"/> Thrives under pressure	<input type="radio"/> Acceptable	<input type="radio"/> Usually conscientious	<input type="radio"/> Takes Pride in Work
Motivation	<input type="radio"/> Very unmotivated	<input type="radio"/> Somewhat motivated	<input type="radio"/> Motivated	<input type="radio"/> Independent	<input type="radio"/> Independent and initiates
Leadership	<input type="radio"/> Always a follower	<input type="radio"/> Usually a follower	<input type="radio"/> Neither leads nor follows	<input type="radio"/> Usually Leads	<input type="radio"/> Always a leader

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Leadership Form

Administrative/ Counselor Statement:

Briefly explain why you feel The Stables would be a successful alternative for the student.

Briefly explain any interventions utilized with the student currently and their outcomes

Counselor checklist:

Please include documentation for all that apply. All items must be checked or marked N/A (Not applicable)

- Attendance in last year and current year
- Most recent grades/report card
- 504 Plan
- IEP
- Medical Instructions

Administration/ Counselor Signature _____

Date _____