



C. Parent / Guardian Recommendation

Child's Name

Last _____ First _____ M.I. _____

Current School _____ Current Grade _____

Current School Year _____

What is your relationship to the child? _____

To assist YMCA Young Leaders Academy in preparing for each child, we ask that you provide the following information. This information is not used to discriminate against admission, but to ensure that we as an organization are meeting the needs of each student.

Please rate the child in the following categories by checking the most appropriate response:

What is the general behavior / attitude of this student? Challenging Borderline Focused Excellent

This child has the following exceptional education needs: NONE LD EBD SPEECH ADD Other

This student's reading ability is best described as: Very Low Below Average Average Above Average

This student's math ability is best described as: Very Low Below Average Average Above Average

This student's ability to follow directions is: Very Low Below Average Average Above Average

This student's ability to accept correction is: Very Low Below Average Average Above Average

This student's leadership ability is: Very Low Below Average Average Above Average

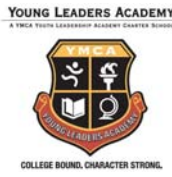
This student's general conduct is: Very Low Below Average Average Above Average

This student's responsibility level is: Very Low Below Average Average Above Average

Please describe the following:

What are the child's biggest strengths? _____

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2009 – 2010 Enrollment Application

What are the child's biggest weaknesses?

How do you feel the Academy can help your child become a better student?

How will the Academy benefit from having your child as a member?

How will the Academy benefit from having you as a part of the parent support network?

Where does your child get his/her information on how to become a young adult?

What is your child's reaction to the Academy?

Does he/she feel able to do the work at the Academy?

What special difficulties, if any, has he/she shown in school work?

In the space below, please provide our organization with comments and additional information that you believe would be helpful to us as we work with your child, e.g., "the main thing this student needs", academic ability, parental involvement, peer interaction, best quality, specific interests, and effective interventions.

Parent / Guardian Signature _____

Date _____