



## School for Children Community of Learners

## **CONFIDENTIAL!**

## **STUDENT INFORMATION FORM**

Name of Student:\_\_\_\_\_ Grade:\_\_\_\_\_

Dear School Head or Teacher-in-Ch	arge,					
Kindly accomplish this Student Info is an applicant to our School.	ormation	Form	for you	ır studen	t who	
Please email directly to: colfschool name as subject of the email.	@gmail.c	com w	vith the	student's	s full	
Thank you very much.					ity of Learner ns Committe	
ease check those that apply:						
Student has: difficulty with academics specific subjects: learning problems social/emotional problems additional information:						
special guidance need disciplinary problems specifics:						
ease rate the student:	Poor		Fair		Excellent	
Independent work and study habits:						
Ability to work cooperatively with adults in school	1	2	3	4	5	
Ability to engage in extra-curricular activities	1	2	3	4	5	
Language skills:						
oral	1	2	3	4	5	
Written	1	2	3	4	5	
Reasoning and problem solving	1	2	3	4	5	

Student's	strength	Student's needs
ease check items wh	hich apply:	
Stude Stude	ent's family is seldom invo	w interest in the student's school life.
dditional comments v	you may wish to make ab	pout the student.
		Principal
		Principal
		Principal
Please affix school's o		Signature
Please affix school's o	dry seal	Signature
Please affix school's o	dry seal	Signature
Please affix school's o	dry seal	Signature