TO THE GUARDIAN(S): Please sign below and give this form to your child's present school.

PERMISSION FOR SCI	HOOL TO RELEASE INFORMA	TION
Name of Applicant		Applying to Grade
	ians we will not have access to this	nis form to Centreville Layton School. We confidential information and that it will not become
Date	0	

TO THE TEACHER:

Thank you for completing this form. The applicant is seeking admission to Centreville Layton School, an independent school for children who learn differently. An honest estimate of the applicant is vital to our admission process and to the success of the candidate. This information is confidential, and cannot be released to anyone. If you wish to discuss this student personally rather than complete this form, please check here \Box , sign, and note your telephone number at the end of this form. The Director of Admissions at Centreville Layton School will contact you.

	Always	Usually	Sometimes	Never	Not Applicable
Exhibits curiosity	•				
Is neat and careful in doing work					
Completes homework when assigned					
Enjoys participating in class					
Is eager to learn					
Follows directions					
Transitions to tasks/activities well					
Seeks extra help when needed					
Keeps materials organized					
Demonstrates age appropriate					
academic learning behaviors					
Cooperates with adults					
Works well with others					
Is respectful to peers					
Respects differences					
Is able to attend to instruction					
Responds to redirection					
Uses technology appropriately					

	te better (academically or p	2	ve observed which could he	erp us understand this
2. Are ther	e any behavioral/social con	cerns that you are aw	are of?	
3. What w	ords can you use to describ	e this student?		
4. What cu	arrent accommodations do	you implement for th	is student in your classroom	n?
5. Evaluate	e the applicant in the follow	ing areas:		
		Performance below grade level	Performance consistent with grade level	Performance above grade level
Langua	Receptive	Stade level	with grade level	State level
Langua	Expressive			
	Decoding			
	Word reading			
Readin	(isolated)			
Headin	Reading			
	comprehension			
	Fluency			
.	Listening			
Listeni				
	Following directions			
	Handwriting			
Writing	Speed Grammar			
	Composition			
	Computation			
Math	Abstract reasoning			
	Problem solving			
Motor	Fine			
Skills	Gross			
	1	l		
Evaluat	tor's Signature		Title	Date
Printed	NT	_		
C -11				
School	Name and Address			
Thank y	you for your input. Please	(CENTREVILLE LAYTON ATT: MEGHAN KIVLER 5201 Kennett Pike Centreville, DE 19807	I SCHOOL
	Or Ema	ail: Meghan Kivler mki	vler@centrevillelayton.org	



CENTREVILLE LAYTON SCHOOL TESTING RELEASE

6201 Kennett Pike • Centreville, DE 19807 • 302.571.0230 • F 302.571.0270 • centrevillelayton.org

TO THE GUARDIAN(S): Please sign below and give this form to your child's present school.

PERMISSION FOR SCHOOL TO RELEASE INFORMATION				
Name of Applicant	Applying to Grade			
We give permission for you to forward the records requested below directly to Centreville Layton School.				
Date	Names of Parents/Guardians			
Signatures of both Parents/Guardians				

TO THE SCHOOL:

Thank you for taking the time to send this information to our school. The applicant is seeking admission to Centreville Layton School, an independent coeducational school offering instruction in grades PreK through twelfth to students who learn differently.

Please send the following information directly to: CENTREVILLE LAYTON SCHOOL

6201 Kennett Pike Centreville, DE 19807 ATT: Meghan Kivler

- * Results of any school-administered standardized testing
- Results of any individualized testing, such as that done by a child study team, or school psychologist
- ❖ Individualized Education Program or 504 Plan

Thank you,

Meghan Kivler Director of Admissions