



Elementary Campus:
8260–13th Avenue, Burnaby, BC V3N 2G5
Secondary Campus:
260–12th Street, New Westminster, BC V3M 4H2

Website: www.johnknoxbc.org
Email: admin@johnknoxbc.org

Educational Support Services

Student Information Form (For Students requiring ESS)

Student Name: _____ Current School Grade: _____

Birthdate: _____ Requested Grade Placement: _____

Parent/Guardian Name: _____

Address: _____

Phone Number: _____

E-mail address: _____

Current School: _____

School Contact Person/ Case Manager: _____

Phone: _____ E-mail address: _____

Please indicate Educational Support Services currently in place for your child

- Special Education (please complete Sections 1 and 3)
- Learning Assistance (please complete Sections 2 and 3)

1: Special Education

Does your child have a Ministry of Education category designation in any of the following?
(Category will be indicated on your child's IEP)

- A (Physically Dependent)
- B (Deaf-Blind)
- C (Moderate Intellectual Disability)
- D (Chronic Health Impairment)
- E (Visual Impairment)
- F (Hearing Impairment)
- G (Autism)
- H (Severe Behaviour or Mental Illness)
- K (Mild Intellectual Disability)

Please describe the support services your child receives in his/her current setting:

- | | | | |
|-------------------------------------------------|-------|-----|-------------|
| a) Education Assistant support | NO | YES | Name: _____ |
| b) Occupational Therapy | NO | YES | Name: _____ |
| c) Physiotherapy | NO | YES | Name: _____ |
| d) Speech-Language | NO | YES | Name: _____ |
| e) Behavioural Consultant | NO | YES | Name: _____ |
| f) Teacher of Hearing Impaired | NO | YES | Name: _____ |
| g) Other (Teacher of visually impaired, etc...) | _____ | | |

PLEASE provide copies of the following:

- most recent report card (at least 2 school terms)
- current IEP (including progress reports)
- most recent psycho-educational assessment (cognitive, academic achievement assessment)
- medical reports related to the diagnosis (genetics, pediatrician, neurologist, etc.)
- behaviour and/or safety plan (if any)
- most recent speech-language, occupational therapy, physiotherapy, psychiatrist, etc. reports

Student can not be considered for enrolment until all relevant documentation has been received

Additional information (if any)

2: Learning Assistance

Does your child have a Ministry of Education category designation in any of the following?

(Category will be indicated on your child's IEP)

- P (Gifted) Q (Learning Disabilities)
 R (Moderate Behaviour or Mental Illness) no category designation indicated on IEP or LSP
 ELL

Describe supports in place for your child (ie: reading support programs, math support, technology, ELL support, enrichment programs, etc.)

Has your child received Speech-Language services?

YES NO

when: _____

PLEASE provide copies of the following:

- most recent report card (at least 2 school terms) current IEP or Student Learning Plan/Learning Support Plan or ELL reports (include progress reports)
 most recent educational assessment (if any)
 behaviour and/or safety plan (if any)
 speech-language assessment report (if any)

Student can not be considered for enrolment until all relevant documentation has been received

Additional information (if any)

3: STUDENT PROFILE

1. What is your child's history?

2. What are your child's strengths/gifts?

3. What are your child's needs/challenges?

4. How do you hope that JKCS will partner with you to support your child?

Additional Information (if any)