



**JOHN KNOX
CHRISTIAN
SCHOOL**

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)