



Valley Catholic Middle School Admission 2012 – 2013

Current VCES Fifth Grade Student Information
Due Friday, January 30

If your student is applying for admission, please complete the following in place of the application form:

First Name:

Last Name:

Parent's Name:

Family E-mail Address:

If your son/daughter has ever repeated or skipped a grade, please indicate the grade(s) and circumstances.

Please describe any variations from the average program made for this student.
(un-timed tests, copies of lecture notes, study partner, special tutoring)

Has your son/daughter been diagnosed with a learning disability or any other condition that affects learning? If yes, please explain.

Does your son/daughter have any conditions that require medical treatment, medication, or counseling? If yes, please explain.

Is there anything else you would like us to know about your student?

Parent Name (Please Print): _____

Parent or Guardian Signature

Date