

PRIOR EDUCATION

Previous school	Address	Grades Attended

HEALTH HISTORY

Does your child have any allergies or physical limitations? Please explain. _____

Please list any medication your child may be using during the school year: _____

Has your child had any traumatic experiences (physical or emotional) during the early years about which we should be made aware (i.e., head injuries, family deaths, surgeries, serious illness, sibling illness, unconsciousness, etc?:

PERSONALITY

Describe your child's interests. Which subjects tend to capture his/her interest? What does he/she enjoy doing most at home?

What are his/her strengths, both academically and socially? _____

What are his/her weaknesses, both academically and socially? _____

Choosing The Boynton Beach School Of The Performing Arts

Please state the three most significant reasons why you would like your child to attend The Boynton Beach School Of The Performing Arts

How can we best nurture your child? _____

SPIRITUAL INFORMATION

Does your family attend church/temple weekly? Yes No

If so, what is the name of your church home? _____

TUITION AND FEES

Name of person(s) responsible for tuition and expenses: _____

I intend to remain at BBSMDD for the entire school year. Yes No

POLICY INFORMATION

Acceptance of any child at The Boynton Beach School Of The Performing Arts is a decision of the The Boynton Beach School Of The Performing Arts. trustees and faculty. Acceptance is based on the compatibility of the school, the parents, and the child.

Accurate and complete information relating to a student’s special learning issues, emotional stability, or physical limitations should be disclosed during the application process. With such accurate information our staff can carefully and prayerfully evaluate how effectively we can meet the needs of each student.

Currently, we do not have a program dedicated to the needs of learning disabled or physically handicapped students. However, a student with these needs is not automatically denied admission.

Is there anything about your child – academically, physically, or emotionally – that we should be made aware of at this time? (Please mention any special evaluations or tests, recommendations or referrals.)
