

ASSEMBLY CHRISTIAN SCHOOL

Parent Questionnaire

(complete one per child)

Grades 1-6

Student Name: _____ Age _____ Grade _____ Date _____

Please explain any YES answers to questions 4-22 and provide any needed information that will enhance our ability to meet your child's needs.

| | Yes | No |
|--|-------|-------|
| 1. Is your child actively involved in church activities? Name of church: _____ | _____ | _____ |
| 2. Has your child been water baptized or confirmed? | _____ | _____ |
| 3. Does your child have any chronic illness, allergies, or eating disorders? | _____ | _____ |
| 4. Does your child have a hearing deficiency? | _____ | _____ |
| 5. Does your child have any visual deficiency not corrected by glasses or contacts? | _____ | _____ |
| 6. Has your child ever exhibited any emotional problems such as depression or anxiety? | _____ | _____ |
| 7. Does your child have a <u>diagnosed</u> or <u>suspected</u> learning disability? | _____ | _____ |
| 8. Has your child ever had an evaluation or services for a learning disability? | _____ | _____ |
| 9. Does your child require special accommodations for their disability? | _____ | _____ |
| 10. Does your child take any medicine on a regular basis? | _____ | _____ |
| 11. Does your child have Attention Deficit Disorder or Hyperactivity? | _____ | _____ |
| 12. Does your child have a tendency to be mischievous, disobedient, or rebellious? | _____ | _____ |
| 13. Has your child ever been suspended, expelled, or refused admission to another school? | _____ | _____ |
| 14. Has your child ever been asked to or allowed to withdraw from another school for behavior or other problems? | _____ | _____ |
| 15. Has your child been sexually abused or involved in homosexual activities? | _____ | _____ |
| 16. Has your child ever smoked or abused alcohol? | _____ | _____ |
| 17. Has your child used marijuana or any other illegal drug? | _____ | _____ |
| 18. Has your child ever been arrested or given a citation for violence or any law? (traffic/vandalism/drugs, etc.) | _____ | _____ |
| 19. Does your child have difficulty responding to authority figures? | _____ | _____ |
| 20. Does your child have difficulty interacting with his/her peers? | _____ | _____ |
| 21. Does your child have any other problems not addressed by the above questions? | _____ | _____ |
| 22. I have received a copy of the ACS Handbook and Honor Code. | _____ | _____ |
| 23. My child and I have read and signed a copy of the ACS Honor Code. | _____ | _____ |

Explain any YES answers to questions 4-21 on the back of this form.

I have discussed the above questionnaire with my child, and agree that it is truthfully answered. I understand if found otherwise, expulsion of the student is possible.

Parent/Guardian Signature _____

