



PERMIT APPLICATION: RANCHO LEARNING CENTER

Student: _____ DOB: _____ ID: _____
First Name Last Name [ID # if available]

Parent/Guardian: _____ Primary Phone: _____
First Name Last Name & First Name Last Name

Address: _____
Number Street (apt) City Zip Code

Current School _____ Current Grade: _____

SCHOOL HISTORY

Please list the schools/programs you have previously attended prior to now:

Elementary School(s) _____

Middle School(s) _____

High School(s) _____

REASONS FOR REQUESTING RANCHO LEARNING CENTER

How did you learn about Rancho Learning Center? _____

What is your primary reason for choosing to attend Rancho Learning Center?

What are you hoping Rancho Learning Center will offer you, that is not currently available/offered at your school site? _____

Please attach copies of: attendance & behavior records, recent grades, report card/transcript

INTERVENTIONS/SUPPORTS

Are you currently being assessed for Special Education? ___ yes ___ no ___ I don't know

Do you currently have an active IEP (for Special Education)? ___ yes ___ no ___ I don't know

ELIGIBILITY/SERVICES _____ DATE OF LAST IEP _____

Please list IEP services being provided _____

*If possible please attach a copy of your current IEP

Has a Student Study Team (SST Meeting) been held on your behalf? ___ yes ___ no ___ I don't know

School where SST held _____ DATE OF LAST SST _____

In what ways has the SST changed your ability to succeed in school? _____

*If possible please attach copies of SST records

Have you been referred to/or are you currently on a SART contract? ___ yes ___ no ___ I don't know

Have you been referred to/or are you currently on a SARB contract? ___ yes ___ no ___ I don't know

Date(s) of SART meeting _____ **SARB** meeting date _____

*If possible please attach copies of contracts

Are you currently under the care of a Physician and/or Private Therapist ___ yes ___ no ___ Decline

May we contact health and or mental health providers ___ yes ___ no ___ not sure

CREDITS (High School Students Only)

Are you currently short credits for High School Graduation? ___ yes ___ no ___ I don't know

Are you planning to attend a 4 year college after graduation? ___ yes ___ no ___ I don't know

How many credits do you currently have _____ How many should you have _____

In what subject(s) are you short credits: _____

