



School Year 2024-25

FaTaj Transition & Learning Academy

Student Application

Student Name: _____
(Last) (First) (Middle)

Address: _____

City: _____ State: _____ Zip: _____

Birt date: _____ Age: _____ Sex M/F Race/Ethnicity _____

Last Grade Completed: _____ Previous School: _____ Grade entering _____

Previous placement: general ed classroom ESE/Special Education 1:1 home school

Current IEP? Y/N if yes, date of latest IEP _____

Step Up Award ID# _____

Parent/Guardian Information

(1) Guardian name: _____ Relationship to student: _____

Cell Phone: _____ Email: _____

(2) Guardian Name: _____ Relationship to student: _____

Additional Address: _____

Street City State Zip

Emergency Contact: _____

Name Relationship to student

Telephone number: _____ Email: _____

Medical Information

Student's Physician _____ Phone: _____

Does the student have any allergies, chronic illnesses, or physical limitations? Yes/no

Allergies: _____

Medication Name _____ Dosage _____ Frequency _____

Has a Physical examination been completed within the past 12 months? _____

Diagnosis



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___ Autism Spectrum Disorder ___ Attention Deficit Disorder/ADHD ___ developmental delay
___ Oppositional Defiant Disorder ___ Speech delay ___ other: _____

Additional Services

ABA therapy:

Agency Name: _____ Date Started: _____

Days/Times: _____

Speech:

Agency: _____ Date Started: _____

Days/Times: _____

Occupational Therapy:

Agency: _____ Date Started: _____

Days/Times: _____

Behavioral, Communication and Academic Concerns

Communication style: Language delayed pulls in the direction of preferred items points to objects
 limited verbal repertoire nonverbal

Behavioral Concerns: Please check the client's current behavioral/emotional symptoms (required):

Physical Aggression (biting, hitting, kicking, scratching) elopes/ bolts Tantrums
 mouths unsafe objects Verbal Aggression Property Destruction disrobing in public
 Non-Compliance Disruptive Behavior Self-Injury climbs furniture

Independent Living: Toileting Problems requires some assistance Picky Eater requires assistance with feeding/eating

Social Skills:

poor social skills prefers to play alone difficulty with initiating peer interactions
 difficulty with sharing difficulty with playing with toys appropriately aggressive towards peers

Academic: below grade level struggles with completing task independently refuses to go to school other: _____