



# BEAR CREEK ACADEMY

## Screening Application

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Referred By \_\_\_\_\_ Date \_\_\_\_\_ Contact Information \_\_\_\_\_

Disability:  N/A  ADD  AD/HD  SLD  SED  Other: \_\_\_\_\_

Presenting Problems: \_\_\_\_\_

Gender:  M  F IQ: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Current School: \_\_\_\_\_

Physical Limitations: \_\_\_\_\_

Previous Placement and Outcomes \_\_\_\_\_

Legal Charges & Dispositions \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Family History \_\_\_\_\_

Current Prescribed Medications \_\_\_\_\_

Contraindications:  Assaultive  Fires  Sex Offender  Runaway  Suicidal  Self-Harm  Medical  Gang  
 Serious Addiction  Felony  Firearm  Drugs at School  Weapon at School  Psychosis

Student's Strengths \_\_\_\_\_

Other Information and Comments \_\_\_\_\_

### Interview Information

Date: \_\_\_\_\_ Participants: \_\_\_\_\_

Student Handbook & Application Given to Applicant:  Yes  No If no, why not? \_\_\_\_\_

Interview/Admissions Review Participants: \_\_\_\_\_

Student Accepted:  Yes  No If "No", Reason why not: \_\_\_\_\_

Completed By \_\_\_\_\_ Date \_\_\_\_\_