



Peer Model Application Preschool

Orange Pre-K provides a Peer Role Model Program, in our mild to moderate special education pre-k classes. Our Special Education SDC Pre-K classes, consist of special education students and 3-4 same aged peers from the community participating in our Special Education preschool program. The Peer Models serve as social, behavioral and language role models for our students with special needs.

The following is information as well as the enrollment process in order for your child to be considered for participation in our Peer Model Program.

- Complete and return the application form and questionnaire to the Orange Pre-K Office. You will then be contacted to schedule an appointment date/time to bring your child to the school to participate in a play-based screening.
- Once screening is completed, you will receive notification regarding acceptance. If recommended, there will be a subsequent appointment scheduled for the parent in order to complete the Orange Pre-K registration packet. At the appointment, the first tuition installment will be due. There is an annual tuition fee of \$1500 for our three year old peer models and a \$2000 annual tuition fee for our four year old peer models. The annual tuition for the four or six hour program is \$2700. Tuition installments are due in August, November, March and June.

Please complete the following application to the best of your knowledge.

Identifying Information:

Child's Legal Name: _____

Birth date: _____ Home Phone: _____

Home Address: _____

Mother's Name: _____

Father's Name: _____

Mother's contact # _____ Father's contact # _____

Does the child live with both Mother and Father? _____ Yes _____ No

Family History:

With whom does the child live with? (Please circle Mother, Father, Both, Guardian
Other: _____)

Indicate siblings and other individuals living with the child below.

Name	Age	Relationship to Child

Describe any developmental, family or other background information that may have or had a significant impact on your child's development. (new baby, moving, etc.)

Is your child toilet trained? _____ Yes _____ No

Has your child participated in any special programs? If so, please check the appropriate program(s)? Speech _____ Occupational Therapy _____

Physical Therapy _____ Other: _____

Class time preference: AM: _____ (9:15-11:15 for 3 year olds and 8:15-11:15 for 4 year olds)
and PM: _____ (11:15-1:15 for 3 year olds and 11:15-2:15 for 4 year olds).

Referred by: _____

Please provide us information on your child's overall abilities to the best of your knowledge.

Speech & Language Skills

Parents' Primary Language: _____ Student's Primary Language: _____

Primary Language Spoken in the home: _____

Can your child follow 2 step directions? (i.e, put your shoes on and get your backpack)

Yes _____ No _____

Can strangers/unfamiliar adults/children understand your child's speech? Yes____ No____

Any other information you would like to share regarding your child's speech and language:

Pre-Academic/Cognitive Skills:

Names Colors: Yes____ No____ Names Shapes: Yes____ No____

How high can your child count? _____ Can your child identify #'s 0-10? Yes____
No____

Can your child identify letters? Yes____ No____

If yes, about how many? _____

Social/Emotional Development

How does your child interact with you? With his/her siblings? With other children?

Is there anything else you would like the teacher to know about your child?

This questionnaire was completed by: _____

Please return or send your completed application to:
Orange Pre-K
5125 E. Gerda Dr.
Anaheim, CA 92807

If you have any questions, please feel free to contact our office at 714-997-6202. Thank you!