

Franklin Special School District

PRESCHOOL POSITIVE PEER MODEL APPLICATION-2021-22

Children must be 4 years old by August 15, 2021

Child's Name: _____ Date Submitted: _____

Date of Birth: _____ Child's Age: _____ Male ___ or Female ___

Parent(s)/Guardian(s): _____

Home Street Address: _____

Phone-Home: _____ Work: _____ Cell: _____

Email address: _____

Zoned Elementary School: _____

Preschool location of choice: * FES * JES * LES *MES * PGES

Admission to the Program

Positive Peer Role Models must be screened and accepted for consideration prior to entering the program.. There will be a limit of five peer role models chosen for each school. Before and/or after care may be provided at the parents' expense by the FSSD MAC program at the Central Office-Annex* 615-591-2559. No before or after care is provided for Franklin Elementary, Johnson Elementary, Liberty Elementary, Moore Elementary or Poplar Grove Elementary.

Fees

As of the 2020-21 school year, FSSD charges an annual fee of **\$3000** for each preschool peer role model. The fees may be paid in a lump sum or bi-annually (*\$1500 paid prior to the beginning of school in August and prior to the beginning of the 2nd semester in December*). *A sliding scale payment option is available upon request depending on your family income.*

If payments are not made using the above options, your child will not be able to attend the Preschool Positive Peer Role Model Program and will be unenrolled. Checks must be made out to FSSD, for **Peer Role Model Program** and sent to the FSSD Central Office in care of the Supervisor of Special Populations, Dr .Cheryl Robey. If you have any questions regarding these fees, please contact Dr. Cheryl Robey @ robeych@fssd.org.

Please answer the following questions to the best of your ability:

1. Has your child attended any other preschool program? Please describe

2. Please describe your child's personality, temperament, and learning style.

3. Has your child had the opportunity to interact and play with other same age peers?

YES NO

4. If you answered yes to Question 3, please describe the setting(s) where your child has opportunities to interact with same age peers and how your child typically interacts:

5. Does your preschool child have a sibling or siblings in FSSD? YES NO

If yes, which school(s) do they attend? _____

6. Please respond to the following:

a. How does your child typically communicate?

b. Does your child ask questions? Yes No

c. Is your child able to speak in clear sentences? Yes No

d. Does your child respond appropriately to yes and no questions? Yes No

e. Do you have any speech and/or language concerns for your child? Yes No

f. Has your child had the opportunity to interact with individuals with special needs?

Yes No Please describe:

Please check the appropriate answer for the following questions.

Independently (I) With Help (WH) or Not Yet (NY)

___ Uses the
bathroom

___ Washes and
dries hands

___ Puts on & takes off
coat

___ Drinks from an open lid
cup

___ Feeds self with
utensils

___ Waits patiently for your
attention

___ Follows simple
directions

___ Entertains self, at least 5
minutes

___ Attends to story from a
book

___ Answers who, what, where
questions

___ Comments on things in their
environment

___ Waits for
turn

___ Initiates interactions with
peers

___ Shares with
peers

8. What would you like your child to gain by participating as a positive peer model?

Thank you for your interest in this program. You will be contacted if your child is selected for an assessment.

Please complete and return the application ASAP.

Please complete the application and bring or mail to FSSD Central Office – Attention: Dr. Cheryl Robey. When an application is received, a preschool teacher will contact parents to set up a time to interview the child. Once a child is determined eligible for the program, the parent will be contacted regarding next steps for entry into the program. .

If you have questions, please contact Dr. Cheryl Robey, Supervisor of Special Populations @ 615/794-6624 or robeych@fssd.org.

The program follows the 2021-22 FSSD calendar found on the FSSD website.

www.fssd.org

Completed by School Personnel

Date Received: _____ Received By: _____

Assessment Results: _____

Accepted into the program: YES NO

School Assignment: _____

Assessment team members: _____
