

MODEL SECONDARY SCHOOL FOR THE DEAF

STUDENT'S INFORMATION: (Please print neatly)

 Student's Name (first, middle and last)

 Street

 City/State/Zip

U.S. CITIZEN:

Yes No

DATE OF BIRTH:

 Month/Day/Year

REQUESTING DORM PLACEMENT:

Yes No

AMERICAN SIGN LANGUAGE (ASL)/SIGN LANGUAGE:

Does your child use American Sign Language (ASL)/sign language?

Yes No If yes, my child uses ASL/sign language:

 % of the time in school

 % of the time at home

 % of the time with friends

FAMILY LANGUAGE:

(Check all languages used at home)

ASL English Spanish
 Arabic Chinese French
 Russian Vietnamese
 Other: _____

This information is for statistical purposes only and will not be used in the admission decision process. Please check the appropriate boxes.

GENDER:

Female
 Male

ETHNICITY: What is this child's ethnicity?

Hispanic or Latino
 Not Hispanic or Latino

RACE: What is this child's race? Mark one or more races to indicate what this person considers himself/herself to be.

American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

SCHOOL ATTENDING

 Present School (applicant is currently attending)

 Street/City/State/Zip

 From Month/Year

 To Month/Year

 Current Grade

Reason for transfer/change from previous school: _____

LANGUAGES USED:

American Sign Language
 English
 Other: _____

PARENT'S PERSPECTIVES OF CHILD

Succeeding at MSSD requires a certain measure of independence. Please share any information about your child's strengths, areas for improvement, and interests in academics, sports, and extra-curricular activities.

What are your goals for your child? _____

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PARENT/GUARDIAN INFORMATION: (Please type or print neatly)

I. _____
 Name of Parent/Legal Guardian

 Email Address

 Home Contact Number _____
 Work/other Contact Number

 What is the native language (first language) of parent/legal guardian?

RELATIONSHIP TO CHILD:

- Parent
- Legal Guardian
- Other: _____

HEARING STATUS:

(of this parent/legal guardian):

- Deaf
- Hard of Hearing
- Hearing

II. _____
 Name of Parent/Legal Guardian

 Email Address

 Home Contact Number _____
 Work/other Contact Number

 What is the native language (first language) of parent/legal guardian?

RELATIONSHIP TO CHILD:

- Parent
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- Other: _____

HEARING STATUS:

(of this parent/legal guardian):

- Deaf
- Hard of Hearing
- Hearing

HOW DID YOU LEARN ABOUT MSSD?

- Current MSSD Student
- Current MSSD Parent
- MSSD Alumni
- Clerc Center Pamphlets/Materials
- Clerc Center Website
- Gallaudet University
- Other: _____

PARENT CONSENT FOR PREPLACEMENT EVALUATION:

It is required by Public Law 94-142 that a parent's permission be obtained before the administration of these diagnostic tests. If we determine that further evaluation information is needed, you will be contacted to arrange a convenient date and time. A copy of the evaluation reports will be shared with you. To the extent possible, we rely upon evaluation results submitted with this application to make admissions decisions. In the event that insufficient information is submitted, we may recommend comprehensive diagnostic tests. These may include all or some of the following:

- Audiological
- Medical/Health
- Educational Assessment
- English as a Second Language
- Sign Language
- Speech and Language
- Psychological
- Social Work
- Occupational Therapy
- Physical Therapy

I have read the above statements and give my permission for the diagnostic tests listed to be administered to my child:

 Student's Name (please print)

 Signature (Parent/Guardian)

 Date

Check one: Parent Guardian

Does your LEA/SEA support this placement for your child? Yes No N/A

The Model Secondary School for the Deaf (MSSD) requires copies of the following documents attached to the application:

- BIRTH CERTIFICATE:** Copy of birth certificate (or other legitimate document)
- PROOF OF RESIDENCY:** Copy attached (i.e. utility bill, last year tax return, or rent/lease agreement)
- CUSTODY STATUS:** Has any court order ever been made concerning the care and/or custody of this applicant?
 Yes No If yes, attach a copy of the court order.