

Child's Name: _____

Date: _____



Complementary Application

What do you like best about Adams International School (AIS)? _____

Why do you think AIS is the right school for your child? _____

Tell us about your child: _____

Please describe your child's learning style (i.e. enjoys working with hands, likes big movement, frustration level is low, quietly observes and mimics, grasps information by being read/talked to). _____

What do you see at your child's greatest strengths and areas of growth? _____

In what areas would you like to see your child's potential more fully develop? _____

What educational goals do you have for your child? _____

Does your child have any special educational, physical, social, or emotional needs? _____

How does your child exhibit self-motivation and independence? _____

Describe your child's academic experience. If your child has experienced difficulties in school, what support have you or the current school provided? _____
