



## Magnussen School Application Form

### General Information

Inquirer's Name:

\_\_\_\_\_

*First Name*

\_\_\_\_\_

*Last Name*

Contact Information:

\_\_\_\_\_

*Email Address*

\_\_\_\_\_

*Home Phone*

\_\_\_\_\_

*Cell Phone*

Current Location:

\_\_\_\_\_

*City*

\_\_\_\_\_

*Country*

How did you hear about us? Please check all that apply:

EAS/ECIC/Magnussen Family

Website

Word of Mouth

Social Media

Professional Referral

Other (Please Describe):

\_\_\_\_\_

## Student Profile

Student's Name: \_\_\_\_\_

*First Name*

*Last Name*

Student

Information: \_\_\_\_\_

*Date of Birth*

*Grade Level*

&

*Handedness*

Has the student had any recent assessments? (Please check all that apply.)

	Yes	Pending	Considering	No
Psycho-Educational Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Educational Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Psychological Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vision Testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Testing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please describe below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Previous Diagnoses: (Please check all that apply)

	Yes	Suspected	No
Learning Disability / Disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention Deficit Hyperactivity Disorder (ADHD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autism Spectrum Disorder (ASD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe the results of any relevant assessments:

## Student Profile Continued

Please describe the student's strengths and weaknesses:

Hopes and dreams for the student:

Is there anything else you would like us to know?

*Thank you!*

Please submit this form to: [admissions@eatonarrowsmith.com](mailto:admissions@eatonarrowsmith.com) or fax to: 604-449-5280.

## Magnussen School Admissions Process

### *How to Prepare for you Admissions Meeting:*

- Review our website, including the programs offered, the students we support, and the outline of the admissions process
- Attend an [information session](#)

### *Admissions Checklist:*

#### Admissions Process:

1. Contact us
2. Send us report cards, assessment reports, and other documents that would be helpful in our understanding of the student's learning profile
3. Admissions meeting with a member of the admissions team to determine whether the program is a fit for the student

**At this point, we are able to offer a space in one of our programs. We can also set up a visit for the student. You are now ready to enroll!**

#### Registration Process:

1. Please complete and return all forms and payments (these will be sent via email when a space is offered)
2. Send copies of recent report cards, recommendations from current teachers regarding grade placement, and other reports if applicable
3. Welcome meeting with school Principal
4. Student's first day!

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*Please don't hesitate to let us know if you have questions along the way – we are always happy to connect with you as you explore options at Magnussen School!*

The Admissions Team can be reached at:  
604-449-8327 & [admissions@eatonarrowsmith.com](mailto:admissions@eatonarrowsmith.com)