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BOARDING SCHOOL PARENT FORM

Student's full name
Parent(s) name
Marital status:
Home phone: Work phone:
Referred by:
Educational history:
Past disciplinary problems (smoking, drugs, alcohol, school disruptions):
Need for structure: is child self-disciplined in any areas?
What is child MOST interested in?
Other talents, hobbies, past activities, sports?

What do you see as the student's best qualities?
What are the student's greatest problems or handicaps?
How committed is the student to attending boarding school?
Has the student ever been away to camp?
Religious background of student:
Has the student ever been seen by a psychologist? Who? For what reason?
Does the student have many friends?
3 Part Question
(1) How well does the student get along with peers?
(2) With siblings?
(3) With adults?
2 Part Question (1) How does the student react when he cannot have his/her own way, or when corrected by an adult?
(2) What works? What doesn't?

Who usually disciplines him/her?
CHECK LIST:
is easily discouraged
has frequent night disturbances
walks in sleep
does not sleep well
wets bed
is very shy
shows off excessively
is very stubborn
is very disobedient
shows signs of depression
swears excessively
has extreme or unusual fears
is very lazy
overly dependent for age
is very nervous
fire-setting
□ allergies
is very sensitive to criticism
has many temper tantrums
steals
lies
daydreams a lot
bullies others
seems hyperactive
has very short attention span
is suspicious is a very isolous
☐ is very jealous ☐ is destructive
has sudden mood changes is unsociable
is unsociable has strong hates
engages in unusual sexual activities
has other odd or compulsive habits

Other:			
Do you plan to apply	for financial aid?		
20 Jour Plan to apply			