

KENTWOOD PREPARATORY SCHOOL

A

ORIENTATION CHECKLIST

School Year: _____



Dear Parents:

Welcome to the new school year! Attached hereto, please find a) forms for completion that should be returned to us, b) forms to further acquaint you with our program and c) information on the forms and documentation we need to complete your child's file. We look forward to working with you - **THE KENTWOOD STAFF.**

★ **A star indicates that it is not necessary for returning students to re-complete the form. Returning students wishing to update or modify any form, however, may complete the form**



Forms to be completed and returned to Kentwood

(All forms must be completed and returned. If not applicable, write the student's name and N/A across the form)

- | | |
|--|---|
| A ___ Orientation Checklist (This Form) | B ___ Authorization Form |
| C ___ Program Priority List ★ | D ___ Preliminary Diagnostic Info. ★ |
| E ___ Medication Form | F ___ Authorization for Medical Treatment |
| G ___ Parent Rating Scale | H ___ Ambassador Form/Confidentiality Sheet ★ |
| I ___ Bill of Rights | J ___ Transportation |
| K ___ Contact Sheet | L ___ Miscellaneous Information |
| M ___ Parent Volunteer Form | N ___ After School Arrangements |
| O ___ Parent/Student Handbook Receipt/Review | P ___ After Care Application |



Handouts - for information purposes only

Dress Code (School Uniform)
Calendar
Miscellaneous Information Copy for Parents
Menu
Medication Procedure
* Parent/Student Handbook *(Email Only)
SchoolMessenger Information



Documents that parents need to ensure have been given/sent to Kentwood (ASAP)

Immunization/Health Records <FOR NEW STUDENTS AND 7TH GRADERS>
Prescription/s or Pharmacy Printout (photocopy)

PLEASE SIGN THIS SHEET AND RETURN IT WITH ALL OTHER APPLICABLE DOCUMENTS



IMPORTANT: PLEASE ATTACH A RECENT PICTURE OF YOUR CHILD TO THIS FORM

I HAVE REVIEWED AND UNDERSTAND ALL ITEMS ON THIS CHECKLIST

Parent/Guardian Signature

Parent/Guardian Signature

Student Name

Date