

Referring LEA: _____

Interview/Tour Date: _____

STI #: _____

Acceptance/Denial Letter Sent: _____

APPLICATION FOR ADMISSION CHECKLIST
The Gladys H. Oberle School
 404 Willis Street P.O. Box 801
 Fredericksburg, VA 22404
2021-2022

STUDENT: _____

DATE OF REVIEW: _____

BIRTHDATE: _____ AGE: _____ GRADE: _____

START DATE: _____

RACE: _____ GENDER: _____

PARENT/GUARDIAN CONTACT INFO:

_____: _____

_____: _____

ADDRESS: _____

_____: _____

_____: _____

_____: _____

ALLERGIES: _____

_____: _____

LEA CONTACT: _____

CONTACT E-MAIL: _____

CONTACT PHONE: _____

BASE SCHOOL: _____

To be considered for acceptance, the following records must be provided with this application form.

_____ Copy of Current IEP including Addendums

Services: _____

Original Date _____ Addendum Date _____ Diploma: _____

_____ Copy of Latest Eligibility Documents

Primary Disability / Secondary

_____ Minute's _____ date _____ / _____

_____ Psychological Report _____ date _____ FSIQ _____

Verbal: _____ Nonverbal: _____ Working Memory: _____ Processing _____

_____ Educational Report _____ date _____ Reading _____ Math _____ Writing _____

_____ Sociocultural Report _____ date _____

_____ Medical Report _____ date _____

_____ Copy of Student Attendance (Year to Date)

_____ Copy of Student Discipline Record (Including Year to Date Suspensions and Reasons for Suspensions)

_____ Copy of Physician's Certificate (Physical) with Doctor's Signature

_____ Up-To-Date Immunization (Shot) Record (new series effective July 1, 2021):

_____ TdAP Booster (7th) _____ MenACWY(7th/12th) _____ HPV(7th) _____ HepB(11-15 yr)

Case Manager: _____

Counselor: _____

_____ Copy of Up-To-Date Student Transcript

Grade Level _____

Report Card Date:	Grade:
English	
Math	
Science	
History	
PE	

SOL Test	Date	Score	To Take/Retake
Earth Science			
Biology			
Algebra I			
Geometry			
World History I			
VA/US History			
English 11 Reading			
English 11 Writing			

Additional Notes: