

Please tell me about your long-range educational goals for your child.



How do you see our personalized learning/independent study education program helping your child achieve those goals?

Why do you feel this personalized learning/independent study education program will be different from or superior to your child's current educational program?



Why do you believe your child can be successful without the daily support of classroom instruction as in a regular school setting?



How much time do you plan on allocating for the direct teaching and monitoring of your child's progress each week?

Hours per day: _____ Days per week: _____

Describe a typical school day schedule for your child in a personalized learning/independent study educational program.



Describe the space(s) and resources in your home which will be used for your child's learning activities.

How will this enhance learning for your child?



Tell me about your child's academic strengths and interests.



In what subject/s does your child need help?

- Reading
- Writing
- Spelling
- Science
- Math
- Social Studies



Thank you for taking time to provide this information to give us a little more insight into how best we can help you and your child.