



**Flossmoor School District 161**  
21st Century Learners Today, Leaders Tomorrow

Dr. Dana Smith, Superintendent

41 E. Elmwood Drive  
Chicago Heights, IL 60411  
708.647.7030  
[www.sd161.org](http://www.sd161.org)

Dear Parent/Guardian:

Early development of reading, writing, language, and mathematics skills result from a combination of factors which include rich and varied travel, environmental experiences, opportunities for early and frequent exposure to books and language rich experiences, older siblings who provide language and learning models, and high average to superior ability.

School District 161 School Attendance-Early Admission Policy 7:50 requires that parents who would like their son/daughter to be considered for early admission into FIRST GRADE complete an application process. The following must be included in this process:

1. Verification of residence
2. Proof the child will be 6 years of age by December 31 of the school year of admission
3. Completed and signed Early Admission Application must be submitted to the Superintendent of Schools by April 1 prior to the child's 6<sup>th</sup> birthday
4. Proof of attendance at a non-public preschool and continued education at that school through kindergarten
5. Proof that the teacher of kindergarten at the above school was an appropriately certified teacher
6. Signed release of information form

or

1. Verification of residence
2. Proof the child will be 6 years of age by December 31 of the school year of admission
3. Completed and signed Early Admission Application must be submitted to the Superintendent of Schools by April 1 prior to the child's 6<sup>th</sup> birthday
4. Signed release of information form
5. Upon completion of above, an evaluation shall be administered by a school psychologist certified or registered in the State of Illinois.
  - a. This evaluation must verify that the child scores in the high average - superior range on the Woodcock Johnson Test of Early Cognitive and Academic Development. (ECAD).
  - b. District 161 school psychologists are available to administer this assessment. Please contact either Mychole Willis at [mwillis@sd161.org](mailto:mwillis@sd161.org) or Amber Gumm at [agumm@sd161.org](mailto:agumm@sd161.org) to schedule a time for the assessment.

The above information will be reviewed by a team including the Building Principal and the Director of Learning and Instruction. A representative of the team will then meet with the parents to discuss the results and recommendations pertaining to the Early Entrance of this child.

Please call me at 708.647.7016 if you have any questions regarding the application process.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Amabel Crawford'.

Amabel Crawford  
Director of Learning and Instruction



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## EARLY ADMISSION 1<sup>st</sup> GRADE REQUEST

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Legal Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Cell: \_\_\_\_\_

Name of Preschool and Kindergarten Student attended: \_\_\_\_\_

Address of above school: \_\_\_\_\_

Telephone number of above school: \_\_\_\_\_

Name of Kindergarten teacher: \_\_\_\_\_

Illinois Teaching Certificate Number of above teacher: \_\_\_\_\_

Name of person filling out this form: \_\_\_\_\_

Relationship to student: \_\_\_\_\_



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**Flossmoor School District 161**  
**RELEASE OF INFORMATION**

This agreement authorizes the release of information regarding the following individual:  
\_\_\_\_\_. The release is between School District 161 staff /  
administration and the following individual/agency:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

The authorization allows the release of the following types of information:

- Psychological Assessment and Interpretation
- Developmental Skills assessment (Language, Readiness, Academic, Motor, Etc.)
- Social / Emotional Assessment and Interpretation
- Physical Health / Development Status Assessment
- Other

This release is good for one calendar year beginning \_\_\_\_\_ and ending \_\_\_\_\_.

I authorize the release of information as stated above.

\_\_\_\_\_  
Parent Signature                      Date

\_\_\_\_\_  
Parent Signature                      Date

\*Confidentiality of students is protected according of Illinois School Code.