

Family Interest Form

2026–2027 Program Year

Thank you for your interest in Kaleo Homeschool. Please complete this interest form in its entirety. The information provided will help us prayerfully evaluate whether our program is a good fit for your family and child(ren).

1. Family Information

Parent/Guardian 1 Full Name:

Parent/Guardian 2 Full Name (if applicable):

Primary Phone Number:

Secondary Phone Number (optional):

Primary Email Address:

Secondary Email Address (optional):

Home Address:

Street: _____

City: _____ State: _____ Zip: _____

2. Program Days of Interest

Please select all that apply:

- ☐ Tuesday
- ☐ Thursday
- ☐ Wednesday
- ☐ Tuesday & Thursday
- ☐ All three days (Tuesday, Wednesday, Thursday)

3. Child(ren) Information

(Please complete one section per child. Copy as needed.)

Child #1

Full Name:

Date of Birth:

Age (as of September 1, 2026):

Grade Level for 2026–2027 Program Year:

How long has your child been homeschooled?

Previous educational setting(s) (if any):

- ☐ Homeschooled only
- ☐ Private school
- ☐ Public/Charter school
- ☐ Hybrid / Co-op
- ☐ Other: _____

4. Educational & Learning Information

Does your child have an IEP, 504 Plan, or any learning accommodations?

- ☐ Yes
☐ No

If yes, please explain:

Does your child receive or require any of the following? (Check all that apply)

- ☐ Academic support
☐ Speech therapy
☐ Occupational therapy
☐ Behavioral support
☐ Other: _____

Is there anything our teachers should know about your child's learning style, strengths, or challenges?

Has your child ever been dismissed or removed from any private/public school, microschool, co-op, or other similar program due to behavioral reasons? If yes, please explain:

5. Child's Personality, Gifts & Talents

How would you describe your child's personality?

What are your child's gifts, talents, or interests?

(Examples: academics, art, music, leadership, athletics, creativity, service, etc.)

In your opinion, what are your child's strengths? (academic or otherwise)

In your opinion, what are your child's weaknesses? (academic or otherwise)

How does your child typically interact with peers?

- ☐ Very social
 - ☐ Reserved at first
 - ☐ Needs encouragement
 - ☐ Other: _____
-

6. Spiritual & Faith-Based Questions

How do you feel about your child being part of a Christ-centered educational program?

How does your family currently practice or engage with your faith?

(Church involvement, family devotions, prayer, etc.)

What are your hopes for your child's spiritual growth while enrolled in our program?

7. Family Background & Homeschool Philosophy

Why did your family choose homeschooling?

What are you hoping our school will provide for your child and family?

What do you value most in a learning community? (Choose all that apply)

- ☐ Academic excellence
- ☐ Christ-centered teaching
- ☐ Community & relationships
- ☐ Character development
- ☐ Flexibility
- ☐ Other: _____

8. Health & Safety Information

Does your child have any medical conditions, allergies, or dietary restrictions we should be aware of?

- ☐ Yes
- ☐ No

If yes, please explain:

9. Additional Information

Is there anything else you would like us to know about your child or family?

10. Family Commitment & Agreement

Kaleo Homeschool partners with families to support their home education journey. Our program enhances, but does not replace, parent-directed learning. Active family participation is a vital part of our community. Are you willing to partner with our teachers and leadership to support your child's education and spiritual growth?

☐ Yes

☐ No

Are you open to communication, community involvement, and shared expectations within a Christ-centered program?

☐ Yes

☐ No

11. Parent/Guardian Signature

I affirm that the information provided in this application is accurate and complete to the best of my knowledge.

Parent/Guardian Name:

Signature:

Date:

Student Questionnaire 2nd Grade & Older

(To be completed by the student. Parents may help younger children read the questions, but answers should come from the child.)

About Learning

1. What do you enjoy most about learning or school?

2. What is something that feels hard for you when learning?

3. What helps you learn best?

- ☐ Listening
- ☐ Reading
- ☐ Hands-on activities
- ☐ Watching or observing
- ☐ Working with others
- ☐ Working independently

4. What helps you stay focused during learning time?

5. What do you usually do when something feels difficult or frustrating?

School & Community

6. How do you feel about learning in a group with other kids?

- ☐ I really enjoy it.
- ☐ I like it most of the time.
- ☐ I'm a little nervous, but willing to try.
- ☐ I prefer small groups.

7. What do you think makes a good classroom?

8. What makes a good friend?

9. If there is a disagreement or problem with another student, what do you usually do?

Faith & Character

10. What does it mean to you to learn in a Christ-centered school?

11. How do you feel about learning about God and the Bible?

12. What is one way you try to show kindness, patience, or love to others?

Gifts & Interests

13. What are you really good at or enjoy doing?

14. What is something you would like to get better at?

15. If you could share or teach something with the class, what would it be?

Final Thoughts

16. What are you most excited about when you think about coming to this school?

17. Is there anything you want your teachers to know about you?

Students 1st Grade and Under

- Draw a picture of yourself learning
- Draw something you love about school
- Draw something you thank God for