

**Koraes Elementary School**  
**SS. Constantine and Helen Greek Orthodox Church**  
**11025 Roberts Road, Palos Hills, IL 60465**  
**Phone: 708.974.3402 Fax: 708.974.0179**  
**www.koraes.org**  
**Faith, Family and Excellence in Education Since 1910**

New Family Application 2024-2025

Father's Full Name: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

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

Cell Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Public Elementary School

District name and number: \_\_\_\_\_

Name of Church: \_\_\_\_\_

Does your family attend church more than twice a month: YES\_\_\_\_\_ NO\_\_\_\_\_

Child(ren) Baptized Orthodox: YES\_\_\_\_\_ NO\_\_\_\_\_

Primary language spoken at home: \_\_\_\_\_

Second language spoken at home: \_\_\_\_\_

Have any family members attended Koraes? YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, please write the names of those who attended and the graduation year.

---

---

---

Why is an Orthodox education important to your family?

---

---

---

Please explain the reason(s) for choosing Koraes Elementary School as the education choice for your child(ren).

---

---

---

What are your expectations for Koraes Elementary School?

---

---

---

How did you hear about Koraes Elementary School?

---

---

---

Were you referred by a current Koraes family? YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, please write the family name \_\_\_\_\_

Kindergarten Enrollment

(Student must be 5 years of age on or before September 1, 2024)

Has your child attended preschool? YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, name and address of preschool and attended for how long?

---

---

(If you have a report card from a previous preschool, please submit a copy to Koraes)

Does your child spend time looking at books? YES\_\_\_\_\_ NO\_\_\_\_\_

Do you read to your child? YES\_\_\_\_\_ NO\_\_\_\_\_

Is your child able to remember songs and rhymes? YES\_\_\_\_\_ NO\_\_\_\_\_

Has your child had experience with scissors? YES\_\_\_\_\_ NO\_\_\_\_\_

Is your child right or left handed? LEFT\_\_\_\_\_ RIGHT\_\_\_\_\_ NO DOMINANCE YET \_\_\_\_\_

Does your child follow toileting and washing routines independently? YES\_\_\_\_\_ NO\_\_\_\_\_

If NO, please indicate which routines are still developing:

---

---

Has your child ever been evaluated by a professional? YES\_\_\_\_\_ NO\_\_\_\_\_

(Speech Therapist, OT, PT, Behavioral Specialist, Psychologist, etc.)

If YES, please provide reason for evaluation:

---

---

Name of service provider: \_\_\_\_\_

Date of services: \_\_\_\_\_

Is your child currently receiving any services now? YES\_\_\_\_\_ NO\_\_\_\_\_

Does your child currently have an IEP? YES\_\_\_\_\_ NO\_\_\_\_\_

Does your child currently have a 504 Plan? YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, please attach a copy of the most recent evaluation or plan.

Transfer Student(s) Only K-8

*(Please list all previous schools attended, including home school and for what grades attended)*

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade(s): \_\_\_\_\_

Has your student repeated a grade? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, which grade: \_\_\_\_\_

Has the student ever been suspended, expelled, denied re-enrollment, counseled not to return to a school or 504 plan or any formalized educational plan? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, please explain:

---

---

Has the student ever had or has an IEP, ISP, 504 or any other formalized educational plan?

YES \_\_\_\_\_ NO \_\_\_\_\_

Has your child ever received formal intervention services?

YES \_\_\_\_\_ NO \_\_\_\_\_

Has your child ever received English as a Second Language services?

YES \_\_\_\_\_ NO \_\_\_\_\_