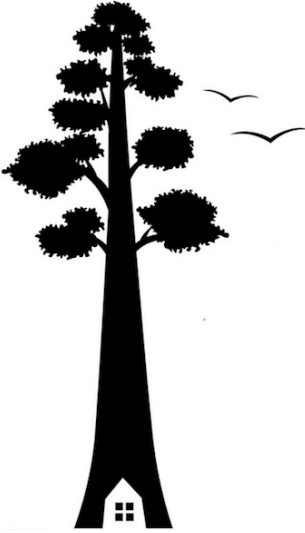


Summer Buddies 2024 Social Language Camp

Application Form



How to apply:

1. Complete Summer Buddies Application Form
2. Email completed form to infosummerbuddies@gmail.com
3. PayPal \$25 Application fee via Venmo to @summer-buddies OR send check to SV Schoolhouse 1438 38th Ave SF CA 94122
4. Receive email confirming submission within 24 hours of paying application fee

Thank you for your interest in our 2024 Summer Buddies Camp programs!

We are so excited to provide an intensive summer program focusing on social language and academics, as well as friendship building skills. Our programs focus on the unique language needs of each camper and provides multiple opportunities to reinforce communication in conversation and play. Daily practice skills include turn taking, eye contact, reciprocal conversation, complimenting & commenting, coping strategies & more! Space is very limited in this unique program and we are eager to create a group of students with complementary skills.

We will follow up with any additional questions before notifying you on the status of your application.

Thank you!

CAMP DATES + COST

Session 1:
June 10th- June 28th

Session 2:
July 8th- July 26th

Session 3:
July 29th - August 16th

All sessions are 3 weeks
\$2,925

**** price will increase ****
\$3,150 on 3/1/2024
\$3,350 on 6/1/2024

Identifying and Family Information

Child's Name: _____

Birthday: _____ Age: _____ Gender: _____

Parent/Guardian: _____

Relationship to Child: _____ Cell Phone: _____

Email Address: _____

Address:

Parent/Guardian 2: _____

Relationship to Child: _____ Cell Phone: _____

Email Address: _____

Address:

Pediatrician: _____

Pediatrician Phone: _____

School Name: _____ Grade: _____

Teacher Name: _____

Teacher Email: _____

Does your child receive special education services? Yes No If yes, please

specify: _____

Do we have permission to communicate with your child's teacher? Yes No

Family History

Is there a language other than English spoken at home? Yes No If yes, what language? _____

Does your child speak the language? Yes No

Does your child understand the language? Yes No

What is the primary language used with your child? _____

Child's Medical History

Does your child have any medically diagnosed conditions? Yes No If yes, please describe: _____

Has your child had any surgeries, accidents, or hospitalizations? Yes No If yes, please describe: _____

Are there any medications your child takes regularly? Yes No If yes, please list: _____

Does your child have any known allergies? Yes No If yes, please describe: _____

Have there ever been any feeding problems (e.g., trouble swallowing, sucking, chewing, or excessive drooling)? Yes No If yes, please describe: _____

Is your child currently being treated by any of the following?

Please check all that apply:

- Occupational Therapist Physical Therapist Neurologist Developmental Therapist
 Speech and Language Pathologist Psychologist Other: _____

Is there anything else we should know about your child's medical history?

- Yes No If yes, please explain: _____

How did you hear about Summer Buddies camp? _____

Developmental History

Does Your Child:

Walk: Yes No

Feed self: Yes No

Dress self: Yes No

Grasped crayon/pencil: Yes No

Complete toileting independently: Yes No

Have difficulty sleeping Yes No

Have difficulty feeding Yes No

Have picky eating habits Yes No

Speech and Language History

What are your concerns regarding your child's speech and/or language development?

Has your child ever received a speech/language evaluation? Yes No

Date _____

Has your child received speech/language therapy previously? Yes No If yes, please describe when, where, and for how long? _____

How does your child communicate? Please check all that apply:

- Gestures/Body Language Sounds Single Words
- Short Phrases Sentences 2-4 words Sentences over 4 words
- Other: _____

Is your child aware of, or frustrated by, any speech/language difficulties?

Does your child:

- Repeat sounds, words, or phrases? Yes No
- Point to common objects upon request? Yes No
- Greet people using words? Yes No
- Ask questions? Yes No
- Follow simple directions (i.e. "Shut the door", "Get your shoes") Yes No
- Respond to yes/no questions? Yes No
- Respond correctly to who/what/where/when/why questions? Yes No
- Enjoy playing with toys? Yes No
- Enjoy playing with peers? Yes No

Behavioral Characteristics:

Check all boxes that apply.

- | | |
|--|--|
| <input type="checkbox"/> cooperative | <input type="checkbox"/> poor eye contact |
| <input type="checkbox"/> attentive | <input type="checkbox"/> easily distracted/short attention |
| <input type="checkbox"/> willing to try new activities | <input type="checkbox"/> aggressive |
| <input type="checkbox"/> separation difficulties | <input type="checkbox"/> outgoing |
| <input type="checkbox"/> easily frustrated | <input type="checkbox"/> withdrawn |
| <input type="checkbox"/> impulsive | <input type="checkbox"/> inappropriate behavior |
| <input type="checkbox"/> restless | <input type="checkbox"/> self-abusive behavior |
| <input type="checkbox"/> friendly | <input type="checkbox"/> active |
| <input type="checkbox"/> elopement (running away) | |

Scheduling

We would like to sign up for:

Check all boxes that apply.

- Session 1 : June 10 - June 28
- Session 2: July 8 - July 26
- Session 3 : July 29 - August 16

Personal Response

What about Summer Buddies best matches the needs of your child?

What are your hopes for your child's experience at Summer Buddies?

What are your child's interests and skills?

What information about your child should we know for them to be successful in our camp?

Additional Comments:
