Established in 1934, P.K. Yonge Developmental Research School is a public school district affiliated with the University of Florida and located on its campus. P.K. Yonge serves approximately 1150 students in kindergarten through twelfth grade. P.K. Yonge is designed as a special school district under Florida Department of Education funding and is given the responsibility to develop innovative solutions to educational concerns in the state and to disseminate successful instructional programs to other school districts. Student attendance is critical to P.K. Yonge’s educational research mission.

P.K. Yonge’s student population serves as a representative sample of public school enrollment based on gender, race, socioeconomic status, and academic ability. Student admissions and enrollments are based on the four categories outlined in the statute. Applications are categorized according to these requirements and students are selected at random from the applicant pool. P.K. Yonge offers Exceptional Student Education (ESE) services and reasonable accommodations in an inclusive setting. P.K. Yonge will determine if a student’s needs can be met at P.K. Yonge. If P.K. Yonge must fundamentally change its program or mission in order to meet the student’s needs, the student may not be admitted to P.K. Yonge.

Applications

All sections of the application form must be completed and submitted to P.K. Yonge Developmental Research School either in person or by mail. Please complete the application checklist and acknowledge the parent agreements by checking the boxes and signing in the spaces provided. Applications that are incomplete (e.g. missing information, documentation, or signatures) will not be accepted.

Submit Applications and Supporting Documentation in Person or by USPS Mail to:

P.K. Yonge Developmental Research School
Attention: Admissions
1080 SW 11 Street,
Gainesville, FL 32601

Acceptance for Admission

When a student is selected for admission, parents/guardians will be contacted by phone, and a letter of invitation will then be mailed to the parents/guardians of the student. Parents/Guardians have 15 days from the date of the letter to respond and pay the $300 activity fee. Some families may qualify for reduced fees. Please see the Admissions Policy for information regarding reduced fees.

More Information

For additional information about P.K. Yonge admissions, please review the admissions policy found on the admissions page on the P.K. Yonge website: http://pkyonge.ufl.edu/about/admissions/.

For additional questions, please contact the Admissions Office at (352) 392-1554, ext. 247.
Admissions Application

Application Checklist
Please complete the checklist, sign the agreement, and submit with complete application. Incomplete applications WILL NOT be accepted.

1. ☐ Admissions Application Form – completed
2. ☐ Educational Services Section – completed
   - If currently on an Individualized Educational Plan (IEP), please supply a copy of:
     a. Consent for placement and/or eligibility documentation with date of initial placement into ESE
     b. Initial psychological report or speech/language evaluation
     c. Copy of the most current IEP
   - If currently on a 504 Plan, please supply copy of:
     a. Consent for placement and/or eligibility documentation with date of initial placement
     b. Current medical documentation about the disability
   - If currently on an Educational Plan (EP), please supply a copy of:
     c. Consent for placement and/or eligibility documentation with date of initial placement into Gifted
     d. Initial psychological report
     e. Copy of the most current EP
   - If student does not have formal educational plan or accommodation plan, but receiving services to
     support the student in an educational setting, please supply a copy of:
     a. Documentation from the service provider describing the current services provided
     b. Documentation of a diagnosis (if applicable to educational setting)
   - If currently receiving ELL/ESOL services or follow-up please supply a copy of current plan.
3. ☐ Student Discipline Record Section – completed
   - Discipline Report – complete report, kindergarten through current year – supplied
4. ☐ Home Language Survey – completed
5. ☐ Student Ethnicity Data – completed
6. ☐ Academic History/Transcript – complete grades, kindergarten through current year – supplied
7. ☐ FSA/FCAT and/or Standardized Test Scores, kindergarten through current year – supplied
8. ☐ Email address in the Parent/Legal Guardian section of the application – supplied

Parent Agreement (Please check and sign below)
☐ By signing below I verify that I have supplied/included all requested documentation and information that is applicable to my student as outlined in the application and checklist.

☐ I understand that my student’s application for admissions to P.K. Yonge Developmental Research School may be denied or any subsequent enrollment may be terminated or revoked if I have provided incomplete, inaccurate, or false information, if I have withheld any information, or if my student does not comply with P.K. Yonge’s attendance policy.

☐ If not admitted and I would like this application to remain active, I understand it is my responsibility as Parent/Guardian to submit an Annual Application Update between July 1 and October 31 with a copy of my student’s most current transcript, test scores, educational services information and discipline record. Failure to complete an Annual Application Update shall render the application inactive and eliminate your student from consideration for future admission.

Parent/Guardian Signature: _______________________________________________  Date: _____________

Parent/Guardian – PRINT Name:  _____________________________________________________________
Admissions Application

Please Print in Ink

Student Legal Name (Last)_________________________(First)________________________(Middle)________________________
Current Grade _____ Current/ Previous School ___________________________ Phone (_____) ______________________
Graduation Year __________ or Year Entering Kindergarten ___________
Home Address ___________________________________ City __________________ ST ___ Zip __________
Mailing Address ___________________________________ City __________________ ST ___ Zip __________
Gender: ___Male ___Female Age _____ Student Birthdate _________ Place of Birth _______________________

Total Family Annual Income $ ________________ To ensure P.K. Yonge is fulfilling its mandate to reflect the demographics of the state, a family's annual income must be included on the application to P.K. Yonge.

Parent/Legal Guardian 1
Name (Last)______________________________________ (First) __________________________
Relationship __________________________ Maiden Name ______________
Home Phone (____)_________________________ Cell Phone (____) ______________________
Address ______________________________________ City __________________ ST ___ Zip __________
Place of Employment: _______________________________________ Business Phone (____) ____________________
E-mail Address ______________________________________ PKY Alum: Y/N ______ Graduation Year _________

Parent/Legal Guardian 2
Name (Last)______________________________________ (First) __________________________
Relationship __________________________ Maiden Name ______________
Home Phone (____)_________________________ Cell Phone (____) ______________________
Address ______________________________________ City __________________ ST ___ Zip __________
Place of Employment: _______________________________________ Business Phone (____) ____________________
E-mail Address ______________________________________ PKY Alum: Y/N ______ Graduation Year _________

Student Lives With:
____ Both Parents/Guardians in one household _____Parent/Guardian 1 _____Parent/Guardian 2
_____ Legal Guardian _____ Other

Siblings Currently Attending P.K. Yonge
Name (Last)______________________________________ (First) __________________________ (Middle) ____________________ Grade _____
Name (Last)______________________________________ (First) __________________________ (Middle) ____________________ Grade _____
Admissions Application

Educational Services

1. **Does your student currently have an Individualized Educational Plan (IEP)?**
   - __No__ __Yes
   
   If yes, please provide a copy of the consent for placement and/or eligibility documentation with date of initial placement into Exceptional Student Education (ESE), initial psychological report or speech/language evaluation, and a copy of the most current IEP.

2. **Does your student currently have an Educational Plan (EP)?**
   - __No__ __Yes
   
   If yes, please provide a copy of the consent for placement and/or eligibility documentation with date of initial placement into Gifted, initial psychological report, and a copy of the most current EP.

3. **Does your student currently have a 504 accommodation plan?**
   - __No__ __Yes
   
   If yes, please provide a copy of the consent for placement and/or eligibility documentation with date of initial placement and current medical documentation about the disability.

4. **Is your student currently receiving services outside of school in order to support them in their educational setting?**
   - __No__ __Yes
   
   If yes, please provide documentation from the service provider describing the current services provided and/or documentation of a diagnosis (if applicable to educational setting).

5. **Is your student currently being evaluated for Exceptional Student Education services?**
   - __No__ __Yes
   
   If yes, provide explanation and/or documentation.

6. **Is your student currently receiving English Language Learners/ESOL services?**
   - __No__ __Yes

P.K. Yonge is designed as a special school district under Florida Department of Education funding and is given the responsibility to develop innovative solutions to educational concerns in the state and to disseminate successful instructional programs to other school districts. P.K. Yonge offers Exceptional Student Education (ESE) services and reasonable accommodations in an inclusive setting. P.K. Yonge will determine if a student’s needs can be met at P.K. Yonge. If P.K. Yonge must fundamentally change its program or mission in order to meet the student’s needs, the student may not be admitted to P.K. Yonge.

**Parent Agreement for Educational Services**

☐ I understand that my student’s application for admission to P.K. Yonge Developmental Research School may be denied, or any subsequent enrollment may be terminated or revoked, if I have provided incomplete, inaccurate, or false information, if I have withheld any information pertaining to educational services that my student requires, or if my student does not comply with P.K. Yonge’s attendance policy.

Parent/Guardian – PRINT Name: __________________________________________________________

Parent/Guardian Signature: ____________________________________ Date: _________________
Admissions Application

Student Discipline Record

At the time of initial application to P.K. Yonge Developmental Research School, a complete disciplinary history must be provided as per Florida Statute 232.0205 and P.K. Yonge D.R.S. admissions policy. An itemized “Student Discipline Report” from all school(s) attended within the past year is also required. These reports may be obtained from the school(s) the student has attended.

1. Has this student ever been suspended from any school? _____No _____Yes, explain below
2. Has this student ever been expelled from any school? _____No _____Yes, explain below
3. Has this student ever been arrested? _____No _____Yes, explain below
4. Has this student ever been subject to juvenile justice actions? _____No _____Yes, explain below

If you answered YES to any of the questions above, please provide details in the space provided below:

____________________

Parent Agreement for Student Discipline

☐ I understand that my student’s application for admissions to P.K. Yonge Developmental Research School may be denied, or any subsequent enrollment may be terminated or revoked, if I have provided incomplete, inaccurate, or false information, or if I have withheld any information pertaining to my student’s discipline record.

Parent/Guardian – PRINT Name: ____________________________________________

Parent/Guardian Signature: ____________________________________________ Date: _____________
Admissions Application

Home Language Survey

The State of Florida requires ALL students, regardless of language background, to complete this survey prior to beginning the school registration process.

Student Legal Name: (Last)__________________________(First)_____________________(Middle)________________
Student Birthdate: _______________ Grade: ______ Today’s Date:_____________________

Home Language: 1. Is a language other than English spoken at home? ___No ___Yes

Native Language: 2. Does the student have a first language other than English? ___ No ___Yes

Dominant Language: 3. Does the student most frequently speak a language other than English? ___No ___Yes

What was the date your student first enrolled in U.S. schools? (not including preschool): _______________________

What was the date your student first enrolled in a Florida school? (not including preschool): _______________________

Was your student born in a country other than the United States (U.S.) or U.S. Territory? ___ No ___Yes

If yes, when did your student first enter the U.S.? _______________________

Parent Agreement for Home Language

☐ I understand that my student’s application for admissions to P.K. Yonge Developmental Research School may be denied or any subsequent enrollment may be terminated or revoked if I have provided incomplete, inaccurate, or false information, or if I have withheld any information pertaining to my student’s home language.

Parent/Guardian – PRINT Name: __________________________________________________________________

Parent/Guardian Signature: __________________________________________ Date: _________________

OFFICE USE ONLY

For all students with a “yes” response for questions 1, 2, and 3 only, complete the testing information in the box:

Student ID:____________________________ Grade: ___ for school year 20__
Date Tested: _______________ Tested by:_______________ IPT Score: ______
Aural/Oral Test Name: __________________________________________________
Achievement Test Name: ___________ Date: ______ Reading %ile: ___ Language %ile: ___
__ Eligible for ESOL __ Not eligible for ESOL
Admissions Application

Student Ethnicity Data Form

Student Legal Name: (Last)____________________________________(First)____________________________________(Middle)____________________________________

Student Birthdate: _______________________ Grade: ________ Today’s Date:___________________

Please answer BOTH questions 1 and 2.

1. Is your student Hispanic or Latino? (Check only one)

☐ Yes, my student is Hispanic/Latino -- a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Hispanic culture or origin, regardless of race

☐ No, my student is not Hispanic/Latino

2. Please check ALL racial descriptors that apply to your student.

☐ American Indian or Alaska Native -- a person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment

☐ Asian -- a person having origins in any of the original peoples of the Far East, Southeast Asia, or the India subcontinent, e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

☐ Black or African American -- a person having origins in any of the black racial groups of Africa

☐ Native Hawaiian or Other Pacific Islander -- a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

☐ White -- a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Parent Agreement for Student Ethnicity

☐ I understand that my student’s application for admissions to P.K. Yonge Developmental Research School may be denied, or any subsequent enrollment may be terminated or revoked, if I have provided incomplete, inaccurate, or false information or if I have withheld any information pertaining to my student’s ethnicity.

Parent/Guardian – PRINT Name: ________________________________________________________________

Parent/Guardian Signature: ________________________________________________________________ Date: _________________
Admissions Application

Student Residency Information

This survey is intended to address the requirements of the Every Student Succeeds Act: Title X/Part C, and Title I/Part C. The answers to questions below will assist us in determining if your student may qualify for additional educational support services.

How many other children/youth are in your household (even if not enrolled in school)? ___________

Name of Student to be Enrolled:
(Last)________________(First)_______________(MI)______ Birthdate ________ Grade ___ School ___________________

Other Children/Youth in Your Household (even if not enrolled in school):
(Last)________________(First)_______________(MI)______ Birthdate ________ Grade ___ School ___________________
(Last)________________(First)_______________(MI)______ Birthdate ________ Grade ___ School ___________________

Parent/Guardian Name (Last)_____________________________________________ (First) ______________________________

Home Address ________________________________________ City _______________________ ST ___ Zip ___________
Mailing Address _______________________________________ City _______________________ ST ___ Zip ___________

Home Phone (______)_____________________ Cell Phone (_____) _____________________

Length of Time at this Address: __________________________ Former Address: __________________________

Place an X in the appropriate box to answer “Yes” or “No”

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
<th>CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. My family lives in an emergency or transitional shelter or FEMA trailer.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. My family is sharing the housing of other persons due to loss of housing, economic hardship or a similar reason; doubled-up.</td>
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<tr>
<td>3. My family is living in a car, park, temporary trailer park or campground due to lack of alternative adequate accommodations, public space, abandoned building, substandard housing, bus or train station, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings or similar settings.</td>
<td></td>
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<tr>
<td>4. My family lives in a hotel or motel.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>5. A child/youth in my home is an unaccompanied youth (youth not in the physical custody of a parent or guardian).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. A child/youth in my home is an unaccompanied youth (youth not in the physical custody of a parent or guardian).</td>
<td>Y or N</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you answered “Yes” to some or all of the questions below, an education representative may contact you to find out whether your child is eligible for additional educational services.

1. Have you moved to a new town to find work within the last 3 years? __YES__ __NO__
2. Did you find work in agriculture or fishing (e.g., field work, canneries, lumbering, dairy work)? __YES__ __NO__
3. Is work in agriculture or fishing a major source of income for your family? __YES__ __NO__

*If you marked “Yes” to any questions above, please indicate the cause by placing an “X” in the appropriate box.

___ Mortgage Foreclosure (M) ___ Natural Disaster-Flooding (F) ___ Natural Disaster-Hurricane (H)
___ Natural Disaster-Tropical Storm (S) ___ Natural Disaster-Tornado (T) ___ Natural Disaster-Wildfire or Fire (W)
___ Man-made Disaster (Major) (D) ___ Natural Disaster-Earthquake (E)
___ Other — i.e., lack of affordable housing, long-term poverty, unemployment or underemployment, lack of affordable health care, mental illness, domestic violence, forced eviction, etc. (O)

Parent/Guardian Signature: ______________________________________ Date: _________________