

# Parent Input Form – Regarding Student Placement 2019 – 2020 School Year

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Current Teacher: \_\_\_\_\_

The purpose of this form is to provide parental input regarding significant needs relative to a child's ability to perform in the school environment. Please note that comprehensive information is submitted by school staff relative to each child's strength and needs. If you need to provide additional information that would directly impact your child's instruction please complete those items below.

## **Academics**

- Experiences significant academic challenges in a specific area: \_\_\_\_\_
  - Problems with focus and attention that impacts learning
  - Experiences difficulty with organization
  - Difficulty managing homework assignments
  - Other concerns: \_\_\_\_\_
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## **Social/Emotional/Behavior**

- Worries about school
  - Easily frustrated
  - Appears highly sensitive
  - Difficulty making friends
  - Experiences conflict with peers
  - Difficulty adjusting to change
  - Other concerns: \_\_\_\_\_
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## **Medical**

- Vision
  - Hearing
  - Allergies
  - Other concerns: \_\_\_\_\_
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## **Current Outside Supports Provided by Parents:**

- Tutoring
  - Occupational Therapy
  - Physical Therapy
  - Speech/Language Therapy
  - Private Psychological Services (Therapy)
  - Private Evaluations
- Type: \_\_\_\_\_

Do any of the considerations require that your child be separated from another student?

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Any other significant concerns: \_\_\_\_\_

For electronic submission, please save this form and e-mail it to Tracy Tracy: [tracy.tracy@rtsd.org](mailto:tracy.tracy@rtsd.org)

**Please return this form no later than April 19th**