APPLICATION FOR 2023-2024 SCHOOL YEAR



STUDENT'S NAME	AGE	
GRADE LEVEL FOR THE 23-24 SCHOOL YEAR	K-2 3-5 6-8	3
PARENT/GUARDIAN'S NAME		
ADDRESS		
EMAIL	PHONE	
PARENT/GUARDIAN'S NAME		
ADDRESS		
EMAIL		
Other family members living in the home (ages		
Diagnosis and Date:		

Current and previous school(s) and dates attended:				
Current and previous therapies, providers, and dates attended:				
carrent and previous merapies, providers, and dates attended.				
Current classroom accommodations:				
List of student's strengths:				

ist of parent's concerns:	
ist of parent's concerns.	
	
Are you interested in an after-school program?	
Are you interested in a summer program?	
are you merested in a summer program:	
Please write a brief narrative about your child.	