



Applicant Information

Contact: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Full School Name: _____

Private/Public: _____ School District: _____

School Address: _____

School Information

Principal: _____ SPED Liaison: _____

Does the school campus have support from the district to participate in this program? YES NO Number of students in school: _____

Does the school campus have good parental support to participate in this program? YES NO Number of Teachers/Support Staff/Administrators: _____

Number of students in SPED dept/classes: _____ Number of Teachers/Staff dedicated to SPED: _____

References

Please list two community references.

Full Name: _____ Relationship with school: _____
Company: _____ Phone: _____
Email: _____

Full Name: _____ Relationship with school: _____
Company: _____ Phone: _____
Email: _____

Campus for Inclusion Program Consideration

Why do you want to be a Three Graces Inclusive Campus?

Brief Description of any efforts already made by the campus to become more inclusive to people with IDD.

Brief Description of any ideas the campus representatives would like to implement through this program.

List of key staff members that will play a role in the inclusion program during the school year. Please include name, grade taught/admin title.

Name: _____ Grade Taught: _____

Administrative Title: _____ Email: _____

Name: _____ Grade Taught: _____

Administrative Title: _____ Email: _____

Name: _____ Grade Taught: _____

Administrative Title: _____ Email: _____

Name: _____ Grade Taught: _____

Administrative Title: _____ Email: _____

Name: _____ Grade Taught: _____

Administrative Title: _____ Email: _____

Please provide the names of any parents and/or community members that would like to work with campus staff and Three Graces staff to implement this program on campus.

Name: _____

Parent/Community Member: _____ Email: _____

Name: _____

Parent/Community Member: _____ Email: _____

Name: _____

Parent/Community Member: _____ Email: _____

Name: _____

Parent/Community Member: _____ Email: _____

Name: _____

Parent/Community Member: _____ Email: _____

