

SPECIAL NEEDS INFORMATION

We at St. Clare of Assisi Catholic School enter in to a partnership with you, the parent(s)/guardian(s), to provide the best education for your child/our student. To be successful in this task, it is necessary that all pertinent data concerning your child's medical, psychological, behavioral, emotional or educational history, which may affect their learning environment or educational progress of the child, be disclosed. Failure to provide this information may prohibit the staff at St. Clare of Assisi Catholic School from meeting the individual needs of your child, and consequently, present reason to request that your child not continue his/her education at this school.

ALL INFORMATION IS HELD IN STRICT CONFIDENCE.

Has your child been tested for any special concerns: academic, attention difficulties, learning problems, behavioral or other? _____ Yes _____ No

Has your child ever been referred for Special Education Services (testing or classes)?
_____ Yes _____ No

If so, please describe: _____

_____.

Has your child ever needed medication for his/her emotional health in order to function in a school setting? _____ Yes _____ No

Please describe: _____

Are you willing to share any of the test results with the Administration of this school?
_____ Yes _____ No

Would you allow a copy of the test results to be placed in a confidential file at this school? _____ Yes _____ No

Signature of Parent/Guardian

Date