Date _____

STUDENT INFORMATION FORM

Student Name_____
Present Grade Level_____
Has your child ever been retained? ___Yes___No
Language spoken at home_____

1. **Please describe your child's learning style and the kind of environment where she/he learns best. (I.e. hands-on activities, structured classroom, creative teaching, noise level tolerance.)**

2. **Please share any other information about your child such as favorite subjects, areas of concern, etc., that you would like us to take into consideration for next year's placement. You may also suggest any student with whom your child <u>should not</u> be placed.**

3. **Please share any special needs your child might have that will help us understand how to move her/him forward academically.**

<u>FOR SCHOOL USE ONLY</u>

Test Scores: Reading_____**Math**_____