

**NORTH BABYLON SCHOOL DISTRICT
EDUCATIONAL INFORMATION FORM**

Student's Name: _____
(PLEASE PRINT) (Last) (First) (Middle)

Date Registered: _____

1. Current Grade Placement _____
2. (a) Has your child ever repeated a grade? Yes _____ No _____
(b) If yes, which grade? _____
(c) Reason(s) for retention _____
3. Has your child ever received additional tutorial help in any of the following subjects or been treated by and of the following specialists?

Reading	Yes ___ No ___ Date _____	Learning Disabilities Specialist	Yes ___ No ___ Date _____
Mathematics	Yes ___ No ___ Date _____	Reading Specialist	Yes ___ No ___ Date _____
Language	Yes ___ No ___ Date _____	Speech and Language Specialist	Yes ___ No ___ Date _____
Spelling	Yes ___ No ___ Date _____	Hearing Specialist	Yes ___ No ___ Date _____
Speech	Yes ___ No ___ Date _____	School Psychologist	Yes ___ No ___ Date _____
Physical Ed	Yes ___ No ___ Date _____	Learning Disabilities Specialist	Yes ___ No ___ Date _____
ESL	Yes ___ No ___ Date _____	Learning Disabilities Specialist	Yes ___ No ___ Date _____
Other (specify)	Yes ___ No ___ Date _____	Learning Disabilities Specialist	Yes ___ No ___ Date _____

If YES for any of the above, please list names and addresses from whom the results of these evaluations may be obtained:

Name: _____ Name: _____

Address: _____ Address: _____

Name: _____ Name: _____

Address: _____ Address: _____

4. Has your child ever been in a special class placement or a special education program? Yes _____ No _____

If YES, please indicate the type of class or program and dates attended:

<u>Grade</u>	<u>Class/Program</u>	<u>School</u>	<u>Dates</u>
_____	_____	_____	_____
_____	_____	_____	_____

Additional Comments: _____

I understand that all reports and test results will be treated confidentially and that this information is necessary for providing the most appropriate education placement for my child.

Date: _____

(Parent/Guardian Signature)