

SPRINGDALE SCHOOL DISTRICT SPECIAL PROGRAMS INFORMATION

To provide continuity in your child's educational program, it is important that we be made aware of any special help he/she may have received or programs in which he/she has participated at previous schools. Please provide the following information to help us expedite your child's proper placement.

CHILD'S NAME: _____

BIRTHDATE: ____/____/____ GRADE: _____

My child:

_____ has had special testing at _____ School in the
_____ School District.

_____ has been identified by the school as gifted and talented.

_____ is classified as a *504* student.

_____ is currently receiving the following special education services:

_____ Indirect Services

_____ Co-teaching/Inclusion class

_____ Resource class

_____ Self-Contained class because of _____

_____ Speech/Language therapy

_____ is not participating in any special education programs.

Comments: _____

