## Washington Elementary **Student Placement Parent Input Form**

This form is available to parents for the specific purpose of providing additional knowledge regarding any special abilities, settings, or any additional information we can use when considering classroom placement.

\*\*\*This form will be shared with classroom teachers.

## \*FORMS WITH SPECIFIC TEACHER REQUESTS WILL NOT BE CONSIDERED\*

Student Name  Grade your child will be entering next school year:	Current Teacher					_
	K	_ 1 <sup>st</sup>	2 <sup>nd</sup>	_ 3 <sup>rd</sup>	_ 4 <sup>th</sup>	_ 5 <sup>th</sup> _
What do you feel are your child's (you may use the b	ack of	this for	n)			
Academic Strengths:						
Areas of Concern:						
In what kind of learning environment do you believe (Examples: structured, moderately structured, flexib			oonds be	st? Plea	ase expla	in.
Is there a child with whom your child should not be p	olaced?	Please	explain			
Please list any other comments you have regarding you	our chi	ld's plac	cement:			