



2019-2020 SPECIAL EDUCATION INFORMATION FORM

Student’s Last Name: _____ First Name: _____ Middle: _____

Is your child currently receiving Special Education Services? Yes ____ No ____

Has your child ever received Special Education Services? Yes ____ No ____

Has your child ever been evaluated for Special Education Services? Yes ____ No ____

If you checked “NO” to all questions above, please skip the next section and sign the form at the bottom.

If you checked “YES” to any of the question above, please complete the form below.

This information is **not** considered in making enrollment decisions. Pointe Schools is committed to providing all eligible students with services upon enrollment and this information is requested solely for purposes of ensuring continuity of services upon enrollment. *Therefore, in order for your child’s file to be complete, you must attach a current copy of your child’s 504 plan or IEP and Psychological records (or the official determination that your child no longer qualifies for services).* Once the Special Education Director has reviewed the paperwork, he/she will call you to set up a meeting.

Age: _____ Grade in School: _____ Date/Grade of IEP (if possible): _____

Please read the categories below and check all that apply to your child:

- ___ Hearing Impaired (HI) ___ Current Behavior Plan ___ Visual Impairment
- ___ Emotional Disability (ED) ___ Speech/Language Impairment ___ MIMR
- ___ Orthopedic Impairment ___ 504 Plan ___ ELL
- ___ Attention Deficit Disorder ___ Occupational Therapy ___ Autism (A)
- ___ Specific Learning Disability (SLD) Other (Specify) _____
 ___ Math ___ Language ___ Reading

I understand that Pointe Schools must have access to my child’s special education records, including evaluations, Multidisciplinary Evaluation Team records, Individualized Education Plans, and other records in order to provide my child with a Free and Appropriate Education. I also understand that intentionally providing false information or failing to disclose information is a falsification of facts and may result in the school filing Due Process and/or my child being withdrawn from school.

Parent/Guardian Signature

Date