

OPTIONAL

Cabot School Parent Information Form For Student Placement

If you wish to share information about your child as part of our class placement process, we have outlined four general areas listed below. Please limit your input to the front of this form only. **In the interest of confidentiality, please DO NOT RETURN THIS FORM ELECTRONICALLY.**

Send it in an envelope with your child addressed to Ms. Thompson no later than May 5, 2017. Due to the nature of the placement process, we will not be able to consider information received after that date.

- **Goals for your child:**

- **Student Learning Style:** Please describe how your child learns, his or her strengths, level of independence, etc.

- **Family/medical Information:** Note any changes in the family that may affect your child at school. Include any medical issues for your child or family that the school may not be aware of now.

- **Social/Emotional Information:** Please share information about your child's social relationships. You may choose to mention **three** children your daughter/son works well with.

PLEASE PRINT

Parent's Name: _____ Date Sent: _____

Child's Name: _____ Grade Entering: _____

