|  |  |  |  |
| --- | --- | --- | --- |
| **Student’s Name:** |  | **DOB:** |  |
| **Parent’s Name(s):** |  |  **Grade:** |  |
| **Parent Email Address:** |  |  **Phone:** |  |
| **Home Address:** |  | **City/Zip** |  |
|  |  |
| **Attending School:****School Address:** |  |  **Zip:** |  |
| **School Contact/Title:** |  |
| **Contact Email:** |  |
| **School Phone:** |  |  **School Fax:** |  |
| **Progress Reports / Grades Sent to:** |  |

**[ ]  Teacher of the Handicapped /Teacher of Student with Disabilities Required**

**(If special education, please attach goals, objects and accommodations relative to this student.)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject:** |  | **Hours per week:** |  |
| **Subject:** |  | **Hours per week:** |  |
| **Subject:** |  | **Hours per week:** |  |
| **Subject:** |  | **Hours per week:** |  |
| **Subject:** |  | **Hours per week:** |  |

**Please indicate approximate duration of instruction as well as any other pertinent information regarding this student:**