

School Year 2023-24
Kindergarten Special Placement Consideration

Child's Name _____ Male or Female _____
(Please Print)

Please state the "EDUCATIONAL CONCERN" you have in placing your student for next school year.

Kindergarten Preference: AM _____ PM _____ Either _____

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Address _____

Home phone: _____ Work phone: _____

Cell phone: _____