



FERNDALE AREA SCHOOL DISTRICT

100 Dartmouth Avenue • Johnstown, PA 15905 • [814] 535-1507 • Fax [814] 535-8527

PHYSICIAN/HEARING SPECIALIST REPORT

Child's Name: _____

Age: _____

Date of Exam: _____

Tentative Diagnosis: _____

Type of Hearing Loss: _____

Prognosis: _____

Recommendations: _____

ATTACH AUDIOGRAM

Physician's Signature Date

Address Phone

Parent Signature Date