## Washington Elementary Student Placement Parent Input Form

This form is available to parents for the specific purpose of providing additional knowledge regarding any special abilities, settings, or any additional information we can use when considering classroom placement. \*\*\*This form will be shared with classroom teachers.

## \*FORMS WITH SPECIFIC TEACHER REQUESTS WILL NOT BE CONSIDERED\*

Forms can be mailed to, dropped off at Washington Elementary 1401 Washington Street, or emailed to lewin.d@wenatcheeschools.org by Monday, April 15, 2024.

Student Name		Current Teacher					
Grade your child will be entering next school year:	K	_ 1 <sup>st</sup>	_ 2 <sup>nd</sup>	3 <sup>rd</sup>	_ 4 <sup>th</sup>	5 <sup>th</sup>	
What do you feel are your child's (you may use the b Academic Strengths:			,				
Areas of Concern:							
In what kind of learning environment do you believe (Examples: structured, moderately structured, flexibl			oonds be	st? Plea	se expla	uin.	
Is there a child with whom your child should not be p	blaced?	Please	explain.				
Please list any other comments you have regarding yo	our chil	d's plac	ement:				
Parent/Guardian Signature:		Da	ytime Ph	one:			

PARENT INPUT FORMS DUE IN THE OFFICE BY MONDAY, APRIL 15, 2024