

**Forestville Union School District**

Phone: 707-887-2279

6321 Hwy 116 Forestville, CA 95436

Fax 707-887-2185

**Pupil Placement – Informational Form**

Student: \_\_\_\_\_ Current Teacher / Grade: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_ Allergies: \_\_\_\_\_

Parent's / Guardian's Name: \_\_\_\_\_

Your child's success is important to us. In the spaces provided below, please describe the academic and social goals which are important to you and your child during the coming year.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. Please describe the learning environment which works best for your child: \_\_\_\_\_

5. What is your child's resent attitude about school? \_\_\_\_\_

6. Please list your child's strengths and interests: \_\_\_\_\_

7. Does your child have any particular learning difficulties? \_\_\_\_\_

8. Check if your child receives any of these services:

Speech \_\_\_\_\_ ESL \_\_\_\_\_ RSP \_\_\_\_\_ Title One \_\_\_\_\_ School Counseling \_\_\_\_\_

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9. Please check which best describes your child:

Is a self starter	Yes _____	Sometimes _____	No _____
Is dependable	Yes _____	Sometimes _____	No _____
Is responsible	Yes _____	Sometimes _____	No _____
Is good at math	Yes _____	Sometimes _____	No _____
Reads well	Yes _____	Sometimes _____	No _____
Is talkative	Yes _____	Sometimes _____	No _____
Repeated a grade	Yes _____	Sometimes _____	No _____
Skipped a grade	Yes _____	Sometimes _____	No _____
Works well w/ others	Yes _____	Sometimes _____	No _____

10. Do you have any suggestions for working with your child? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

11. Is there anything else you would like to share about your child? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

12. Would your child do well in a combination class? \_\_\_\_\_

\_\_\_\_\_

13. In what ways will you be able / willing to help your child's class? \_\_\_\_\_

\_\_\_\_\_

**Please note:** Parents may assist in the transition of their child into the next grade level by completing this **Pupil Placement – Informational Form**. Data on this form will be used to place students into class groupings as one of eight factors which will be considered in making pupil placements. The other factors will include academic ability, achievement level, social needs, disciplinary needs, special education needs (if any), age, and gender. District policy stipulates that balanced, heterogeneously grouped classes are the highest priority for pupil placement. **This form will not be used to assign students to specific teachers.**

The information contained on this form will be forwarded to the child's new teacher to assist in supporting a smooth transition. Please complete this information and return it to the main school office.

Parent's / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_ Please check here if you have special concerns (death, divorce, remarriage, health issues...) which you would like to discuss directly with your child's new teacher.