

PARENT INPUT INTO THE PLACEMENT PROCESS AT CAULFEILD IDEC

Child's Name: _____

Your Child is Going Into Grade: _____

Next Year:

Please comment on, and rank in order, the following criteria with **1.** being the **most** important to you and **4.** being the **least** important. This information will be given to the staff as one of the criteria to use and consider when deciding on your child's placement for the 2021-22 school year.

<u>Rank</u>	<u>Issue</u>	<u>Comment</u>
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_____	Instructional Criteria and/or Learning Style	
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Comment: _____

_____	Friendships / Conflicts	
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Friends: _____

Conflicts: _____

_____	Social/Emotional Concerns the Impact Learning	
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Comment: _____

_____	Other	
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Comment: _____

Name: (Please print) _____ Phone No: _____

*** PLEASE NOTE: Forms that indicate a particular teacher for next year will be not considered.**