

Echo Lake Elementary 2018-2019 School Year

Student Placement Considerations



Student's Full Name: _____

Current Teacher: _____

Current Grade Level: _____

Person completing form: _____

Daytime Phone number: _____

Please tell us how your child learns best:

What teacher characteristics are most important to you & your child?

Are there any social issues or peer interactions that we should take into consideration when placing your child in a class?

Other pertinent information?
