

# School Personnel and Information

Name of School \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Principal \_\_\_\_\_

Counselor \_\_\_\_\_

Teacher \_\_\_\_\_

Teacher Aide \_\_\_\_\_

Resource Teacher \_\_\_\_\_

Psychologist \_\_\_\_\_

Speech Therapist \_\_\_\_\_ # \_\_\_\_\_

Occupational Therapist \_\_\_\_\_ # \_\_\_\_\_

Physical Therapist \_\_\_\_\_ # \_\_\_\_\_

Bus Compound Phone \_\_\_\_\_ Bus # \_\_\_\_\_

Bus Driver's Name \_\_\_\_\_ # \_\_\_\_\_

Bus Assistant Name \_\_\_\_\_

Head of Transportation \_\_\_\_\_

Placement Coordinator \_\_\_\_\_

Parents of Classmates:

\_\_\_\_\_ # \_\_\_\_\_

\_\_\_\_\_ # \_\_\_\_\_

\_\_\_\_\_ # \_\_\_\_\_