

*Barre Town Middle and Elementary School
70 Websterville Road
Barre, VT 05641
802 476-6617 FAX 802 479-5723*

PARENTAL PLACEMENT INFORMATION
**(PLEASE DO NOT SPECIFY THE NAMES OF SPECIFIC TEACHERS OR
INFORMATION REGARDING TRANSPORTATION NEEDS)**

Name of Student: _____ Date: _____

D.O.B.: _____ Home Phone: _____

Name of Student's Parents and/or Guardians: _____

Address: _____

Current Grade: _____ Name of Child's Teacher: _____

**Parental Placement Information forms are reviewed by the current grade level teachers
prior to making placement decisions.**

Do you want this form to be given to the receiving teacher? Yes No

Do you want this form placed in your child's file? Yes No

1. What methods, techniques, or aspects of the learning environment have worked for your child this year?
What methods, techniques, or aspects of the learning haven't worked?

2. What are your child's greatest academic, social, and emotional strengths? _____

3. What are your child's greatest academic, social, and emotional needs? _____

4. Is there a special goal you would like to see next year's teacher work toward for your child?

5. Is there anything you would like your next year's teacher to know before the year begins?

6. Are there any relatives at the same grade level as your child? Yes No

If there are relatives, is there any reason they shouldn't be together? _____

PLEASE RETURN THIS FORM TO THE OFFICE NO LATER THAN MAY 1, 2008. THANK YOU.