

**Leland School District  
Child Find Request Form**

**PERSONAL DATA**

<b>Child's Full Name:</b>	<b>Race/Ethnicity:</b>	<b>Gender:</b>	<b>DOB:</b> _____ <b>Age:</b> _____
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**HOME AND FAMILY INFORMATION**

<b>Parent/Guardian 1:</b>	<b>Parent/Guardian 2:</b>
<b>Home Address:</b>	<b>Home Address:</b>
<b>Home Phone:</b>	<b>Home Phone:</b>
<b>Employer/Occupation:</b>	<b>Employer/Occupation:</b>
<b>Work Phone:</b>	<b>Work Phone:</b>
<b>Child Lives With:</b>	
<b>Child's Physician:</b>	<b>Physician's Address:</b>

**LANGUAGE(S) SPOKEN IN THE HOME**

**Is any language other than English spoken in the child's home?**    Yes    No (skip to next section)

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

Child's Language: \_\_\_\_\_

**CHILD'S EDUCATIONAL SETTING**

**Does the child attend a public/private school or preschool/childcare center?**    Yes    No (skip to next question)

<b>School/Center Name:</b>	<b>School/Center Phone:</b>
<b>School/Center Address:</b>	<b>Teacher:</b> <b>Grade:</b>

**CONCERNS FOR THE CHILD**

*Describe any concerns that you have about the child's development, behavior, and/or learning.*

  
  
  
  

**How did you hear about Child Find?**

<b>Person Making the Request and Agency Represented:</b>	<b>Relation to Child:</b>
<b>Requester's Address:</b>	<b>Requester's Phone:</b>
<b>Requester's Email:</b>	<b>Date Request Received:</b>