



*Willard School*  
**STUDENT INFORMATION FORM**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent/Guardian(s): \_\_\_\_\_

Present Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

1. Please provide any important and relevant information that you feel the Placement Team should know that the classroom teacher might not:

Completed placement information forms must be received by classroom teacher by April 30.