

McKenny Elementary School
2019-20
PLACEMENT CONSIDERATION FORM
(All parts of this form must be completed for consideration.)

1. Child's Name _____ Grade Next Year _____
2. Child's Present Teacher _____
3. What specially about your child's academics do you feel is important for us to know in deciding placement for next year?

4. Are there behavior characteristics (follower, leader, shy, etc.) that we should be aware of in deciding placement? Social needs?

5. Are there any other factors which we should consider? (i.e. medical conditions, allergies)

I understand that the staff at McKenny will consider all factors in placing my child with a teacher next year. I also understand that my request will be given every consideration and will be utilized by the Child Placement Team. (Teachers, Principal, Support Staff)

Parent Signature _____ Date _____