

# Tri-County Regional Vocational Technical High School

## Section 504 Parent Input Sheet

Student: \_\_\_\_\_ Date: \_\_\_\_\_

School: Tri-County Regional technical Vocational High School Grade: \_\_\_\_\_

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

Who has legal authority to make educational decisions for this student?: \_\_\_\_\_

With whom does this student live?: \_\_\_\_\_

**Please answer any of the following questions that you think may be helpful to the 504 Team:**

What are some of your child's strengths? \_\_\_\_\_

What does your child do when not in school? \_\_\_\_\_

Please describe your child's behavior at home: \_\_\_\_\_

Have there been any important changes within the family during the last 3 years?

Do you feel your child is experiencing problems in school? \_\_\_\_\_

When were you first aware of this problem? \_\_\_\_\_

What do you think is causing the problem? \_\_\_\_\_

What time does your child go to bed at night? \_\_\_\_\_

Does your child usually eat breakfast? \_\_\_\_\_

What methods of discipline are used with your child at home? \_\_\_\_\_

**Are there any other pieces of information you would like to share that you feel are important?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_