Fireside Academy
Community Co-Op for Homeschoolers

EDUCATIONAL CONCERNS FORM

*(Please fill out one for **EACH CHILD** that may have some specific concerns)*

Although the Medical Authorization form does have a spot for a brief listing of medical issues, we also recognize that some children may have some special educational needs that should be considered by teachers working with them. Just a few examples of this might include: dyslexia, ADD/ADHD, learning disabilities, emotional issues, specific learning styles, and many others.

While Fireside can not meet every need that your child may bring, we do strive to do our utmost in providing the best quality educational experience for your child. If you can share specific concerns with us, we will work with you, the parent, in trying to address them. A copy of this form will be given to each teacher that your child has during the day at Fireside.

Child's Name: _____ Birthdate: _____

Grade for 2010-2011: _____

Contact Person: _____ Phone: _____

Email: _____

The following medical/emotional/educational concerns apply to my child (please include any background info, medical diagnosis, etc. that will help us best determine the needs of your child)

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