

# STUDENT ENVIRONMENT FORM FOR CLASSROOM PLACEMENT

Student Name (first and last): \_\_\_\_\_ Date: \_\_\_\_\_

Student's present teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

## **REQUESTS FOR A SPECIFIC TEACHER WILL NOT BE CONSIDERED**

Please use this form to describe any special needs your child has which you would like us to consider when we assign students to their classrooms next year.

Please understand that when we place students in classes we try to balance the number of boys and girls, leaders, independent workers and high, middle and low achievers in each classroom. We try to organize classrooms in a manner that will maximize success for all our students. The student placement is done as randomly as possible within this framework.

We appreciate your interest in your child's education. We will use your input in considering your child's placement as we try to meet our goal of creating classes where all the students have the benefit not only of their teacher, but also of each other.

INFORMATION - Please be brief, but complete. Indicate any special needs or circumstances you would like us to consider in assigning your child to a classroom next year.

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In order that this request be considered, it must be submitted to the office by **May 3<sup>rd</sup>, 2024**.