



STUDENT OBSERVATION AUTHORIZATION FORM PADUA FRANCISCAN HIGH SCHOOL

It is the policy of Padua Franciscan High School to have a member from our Learning Support Services Team observe applicants that have an IEP/ISP and ETR or a 504/SEGO/Accommodation Plan. The purpose is to provide a closer look at a how a student's needs are being addressed in a classroom setting with the accommodations that are outlined in the paperwork. The observation is sometimes done in the student's school and/or when the student visits (shadows) Padua.

Name of Student _____ Male Female

(please print) Last First Middle

Home Address _____

Number and Street City, State Zip Code

Home Phone Number (_____) _____ Date of Birth _____

Month Day Year

Student's Current School _____

School Principal _____

School Phone Number _____

School Address _____ City _____ State _____

Student is applying for admission to Padua Franciscan High School for the academic year: 20____ - 20____

I authorize Padua Franciscan High School the permission to observe my child at his/her school and/or at Padua Franciscan High School during a visit (shadow) day.

Parent/Legal Guardian Signature _____ Date _____

Return this form via email or fax to: Katie DeAngelo '08, Director of Recruitment

kdeangelo@paduafranciscan.com

Fax: 888.372.4033 Phone: 440.845.2444 x123