

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	t			_ ∐ Male ∐ Female
(please print)	Last	First	Middle	
Home Address				
	Number and Street	City, St	ate	Zip Code
Home Phone Nu	mber ()	Date	of Birth	
Student's Currer	nt School		Month 	Day Year
School Principal				
School Phone Nเ	umber			
School Address		City	State	
Student is applyin	g for admission to Padua	a Franciscan High School for t	he academic year:	20 20
at Padua Franc	_	hool the permission to obsing a visit (shadow) day, an formation.	•	

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

kdeangelo@paduafranciscan.com

Fax: 888.372.4033 Phone: 440.845.2444 x123