



**NEW PARADIGM COLLEGE PREP ACADEMY**

2450 S. Beatrice St.  
Detroit, Michigan 48217  
PH: 313.406.7060

**Disclosure of Special Needs**

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

1. Have you ever attended an I.E.P. (Individualized Educational Planning Committee) meeting where your child's eligibility for Special Education was discussed? (Circle one) YES NO

If YES, where and when: \_\_\_\_\_  
\_\_\_\_\_

2. Is your child currently enrolled in special Education or has she/he received special education services in the past? (Circle one) YES NO

If YES, please describe the serviced received (e.g. resource room, speech, etc):  
\_\_\_\_\_  
\_\_\_\_\_

3. My child does not receive special services; but they do have a 504 plan. (Circle one) YES NO

4. Did your child receive any other special services, such as social work referrals to other sources, counseling, tutoring, etc? (Circle one) YES NO

5. If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_

6. If your child has been a part of a Special Education program, do you have a copy of your child's current I.E.P.? (Individualized Education Plan)? (Circle one) YES NO

If NO, please obtain and provide the I.E.P. to the school before the first day of school.

7. Do you feel your child is a candidate for Special Services? (Circle one) YES NO

If YES, please explain: \_\_\_\_\_

8. Have you ever had discussions with any school personnel regarding your child being tested for academic, behavior, or emotional concerns? (Circle one) YES NO

If YES, what was their position: \_\_\_\_\_

9. When is the best time to contact you by phone? \_\_\_\_\_  
At what phone number can you be reached? \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_