



7. Has your child has had any previous testing for learning or behavioral needs? If so, please provide a brief description of findings.
8. *For Level I Only:* This program requires that all children be independent with toileting. Is your child toilet trained? (Please note that we do have all Level I children use the restroom before going down to the Atrium.)
9. How would you describe your child's literacy development (reading/writing skills)? Choose one:
- a. \_\_\_\_\_ On grade level
  - b. \_\_\_\_\_ Surpasses grade level
  - c. \_\_\_\_\_ Needs support with grade level texts

Comments:

10. What else would you like us to know about your child in order to provide the best possible care and guidance?