



CONFIDENTIAL

Learning Support Services

for Grades PJ-I2

Guidance Counselor/Principal Use Only

The student has applied for admission to ACS Athens. This form should be submitted for all students regardless of whether or not Special Education Services are needed. This form should be completed by the Guidance Counselor or Special Services Coordinator of the school (if there is no Guidance Counselor, please give this form to the Principal) and submitted directly by the student's previous school at admissions@acs.gr.

To ensure that we appropriately plan for and support this student it is essential that all information is complete and accurate. Please respond with integrity regarding the student's abilities, needs and current or prior support. Incomplete or inaccurate information may limit our abilities to provide appropriate services.

Student Name (Last, First, Middle):

How long have you known the student?

Does the applicant receive any Special Education Services in your school? If yes please check the services that apply.	YES	NO
Learning Support Services (1-1 assistance, remedial interventions, math/reading/writing support)		
Occupational Therapy (prior or currently)		
Speech and Language Therapy (prior or currently)		
Does or did the student have an Individualized Learning Plan (ILP, IEP, 504)?		
Do any of the applicant's school records indicate that he/she has ever been tested by Special Education personnel or school psychologists?		
Has the student received any socio-emotional counseling?		
Do you have any reason to believe, based on your experience with this student, that there are Special Education needs not yet discovered?		

If YES, in any of the above please elaborate:

Additional comments or thoughts about this student:

Should we need to contact you for further details, please provide us with your contact information:

NAME & CAPACITY:

YOUR EMAIL:

YOUR TELEPHONE NUMBER:

NAME OF YOUR SCHOOL:

SIGNATURE:

DATE:

Thank you! We appreciate your time in submitting your feedback.