



PROJECT SOS - SCHOOL

Parent's student profile

Name	Birthdate
School	Phone
Grade	Date completed
What my child is interested in?	My child is best at . . .
My child's strengths. . .	Concerns I have for my child. . .

Services that my child needs . . .	My child needs help with. . .
Help my child has received in past. . .	Problems with child's current program. . .
Suggestions I have about working with my child . . .	My child is ready to learn. . .
Possible alternatives and/or additions to my child's program . . .	When my child leaves high school as a young adult I expect . . .