MEDICINE HAT PUBLIC BOARD OF EDUCATION OPERATES AS MEDICINE HAT PUBLIC SCHOOL DIVISION, AND FOR THE PURPOSE OF THIS DOCUMENT WILL BE REFERRED TO AS "MHPSD" AND/OR "DIVISION"

SECTION 700 – Educational Program

ADMINISTRATIVE PROCEDURE - EXHIBIT: APPLICATION FOR STUDENT PLACEMENT IN A SPECIALIZED PROGRAM

EXHIBIT CODE:	708 E 001		
Policy Reference: 708 Alternative Programs	Procedure Code Reference: 708 AP 004 - Specialized Program Placement		

EXHIBIT

See below for application form.

Approved: February 25, 2019 **Revised:**

APPLICATION FOR STUDENT PLACEMENT IN: SPECIALIZED PROGRAM

Student:			Date of B	irth:		
	Name (Last, First)			MM/DD/YYYY		
Home Address:			Pho	one:		
Referring School:	ol:			Grade:		
	APPLICATION PROC	EDURES:				
Please make sure all item	ns are check marked yes before submit	ting to Cent	tral Office fo	r review		
		PLE	EASE CHECK:	YES NO		
Consu						
Conference with parents regarding program referral has occurred \Box						
2011	referree with parents regarding progra	c.c.rui	ias occurred			
	PLEASE CHECK:					
Supporting documentation attached:		YES NO		Assessment Date:		
Psycho-educational asse	ssment	11.5	INO			
Medical report						
Current ISP/BSP/MSP						
Anecdotal records/Powe	rSchool log entries					
Written recommendation						
Other:						
			ı			
Classroom Support Teacher's Signature			Date			
Principal's Signature			Date			
* <u>NOTE</u> : A SIGNED PARENT	T PERMISSION FORM IS REQUIRED FOL	LOWING PL	LACEMENT D	ECISION		
Discount		_				
Placement:			Date: _			
Accociato Cunarintandan	t's Signature:					
Associate Superintenden						

