

## REQUEST TO SHARE INFORMATION FORM

### Linglestown Christian Nursery School

My child, \_\_\_\_\_ is receiving services. Complete all that apply. **School Year** \_\_\_\_\_

<p>_____ <b>Early Intervention</b> (birth through age 2)</p> <p>Name of caseworker _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>	<p>_____ <b>Intermediate Unit Inclusion Services</b> (ages 3-5)</p> <p>Name of inclusion specialist _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>
<p>_____ <b>BSS Name of Agency</b> _____</p> <p>Name of therapist _____</p> <p>Email _____</p> <p>Phone Number _____</p> <p>Services provided _____</p>	<p>_____ <b>Intermediate Unit Occupational Therapy</b></p> <p>Name of therapist _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>
<p>_____ <b>TSS Name of Agency</b> _____</p> <p>Name of therapist _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>	<p>_____ <b>Intermediate Unit Speech Services</b></p> <p>Name of contact _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>
<p>_____ <b>Other Name of Agency</b> _____</p> <p>Name of caseworker _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>	<p>_____ <b>Intermediate Unit Physical Therapy</b></p> <p>Name of caseworker _____</p> <p>Phone Number _____</p> <p>Email _____</p> <p>Services provided _____</p>

I give my permission for Linglestown Christian Nursery School to share and receive information from these agencies.

Children are welcome to attend our program if we can provide for their needs with reasonable accommodations. However, we recognize that not every school setting is the ideal place for every child, and we are not staffed at the present time in such a way as to provide 1-1 care that may be required. We will deal with each child on an individual basis. LCNS is not, nor does it represent itself as being a specialized school for children with special needs. The scope of our ability to help is limited to the fact that it does not take away from the education of other students within the teacher's scope of training. (Family Handbook, p. 17) The Nursery School may determine that the ministry is not appropriate for the child. Families will be given verbal and written communication from the Director terminating the child from the ministry. (p. 16)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Please update this form when changes occur.  
Original to child file, copy to parent