



Mild-Moderate Application for 2012 - 2013

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Child's Name (first, middle, last)

Date of Birth **(copy of Birth Certificate must be attached)**

Sex

Parent's/Guardian's Name

Parent's/Guardian's Name(s)

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Home Phone Work/Cell Phone

Home Phone Work/Cell Phone

Address (where child resides)

Address (if different than child's address)

City, Prov. Postal Code

e-mail address

School Child will Attend in 2012-13 School Year

School Name

Teacher

School Phone

Days & Time Attending School

Address

City, Prov. Postal Code

I am requesting Foothills Creative Beginnings to apply for Mild-Moderate Funding: _____
Parent(s) Signature(s)

Has your child had a recent vision and / or hearing test? _____

I authorize Foothills Creative Beginnings to apply for and administer Mild-Moderate funding for my child.

Parent's/Guardian's Signature _____ Date _____

If you have any questions or concerns please contact Michael Coulson at (403)289 7977

For Office Use Only:

Alberta Student Number _____ French or Aboriginal Status Requested _____

Assessments submitted

Birth certificate copy submitted