



SPED BLOCK

Student Name: _____ PennWest Student ID#: _____

Local Address: _____ Home Address: _____

Local Phone/Cell#: _____

Home Phone/Cell#: _____

Schools I have previously been placed in and in what capacity: _____

ATHLETICS (if applicable)

PennWest Email ONLY: _____

NAME of sport: _____

Certification Area: _____

Practice time(s): _____

Anticipated Date of Graduation: _____

PERSONAL AUTO IS REQUIRED (*it is your responsibility to make arrangements if you do not have your own transportation)

Do not write below this line

Low Incidence – High School ☐

Low Incidence – Elementary School ☐

I need a:

High Incidence – High School ☐

High Incidence – Elementary School ☐