TRITON ELEMENTARY SCHOOL

**STUDENT PLACEMENT CONCERNS**

If you have specific concerns about your child’s placement for the 2025-26 school year, please complete the *relevant portions* of this form and return it to the Triton Elementary **office no later than May 19, 2025**. You may also call the office at 574-342-2355 to speak with Mrs. Cook about these concerns. Please understand that we try our best to accommodate special requests that are in the best interest of students, but we cannot guarantee that all requests will be honored.

Name of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Grade \_\_\_\_\_\_

1. **Please consider** the following information when placing my child in a classroom for the 2025-26 school year. (Explain academic, behavior, medical and/or social concerns.)
2. I feel the needs of my child **would not be met** in a specific teacher’s classroom. (Name the teacher and your specific reasons.)
3. I request that my child **not be in the same classroom as** the following student. (Please state your reasons.)

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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FOR OFFICE USE ONLY

Date Received \_\_\_\_\_\_\_\_\_\_\_\_ Initials \_\_\_\_\_\_