



ST. GABRIEL FAITH FORMATION

BEING CHRIST · EVERY DAY · EVERYWHERE

STUDENT INFORMATION AND ALLERGY FORM

Because we only have the privilege of being with your child once a week, it is difficult to know all that we should know about them. The more we

know, the better equipped we will be to help every child along their faith journey while being supportive and sensitive to any specific issues or needs of each child. Please provide any information that will be important for the catechists to know. This information will be help confidential to the program and shared with the catechist to help make accommodations where necessary. Thank you for sharing!

CHILD'S NAME GRADE ROOM

Allergies:

Medical issues or medications:

Please put a √ next to any/all that apply:

ADD/ADHD Anxiety

Specific Learning Disabilities IEP/504 Plan

Autism Spectrum Asperger's Syndrome

Special Seating Difficulty Reading

Difficulty Writing

Family issues that add stress/difficulty

Other concerns/issues:

Additional information or notations:

I would like to be contacted to discuss my child's needs at (# to be reached):