

# Learning Questionnaire

## Pre-Kindergarten – Grade 1

Saints Philip and James Parish School  
721 East Lincoln Highway  
Exton, PA 19341  
610-363-6530  
school.sspj.net



Family Name \_\_\_\_\_

Child's Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
(Last) (First) (Middle)

In order to best address your child's learning needs, please provide the following information:

1. Have you had a need to contact an Early Intervention Unit concerning your child?

\_\_\_ YES \_\_\_ NO

2. If so, what prompted your contacting Early Intervention?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What type, if any, of screenings or evaluations were performed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What type, if any, of services were provided?

\_\_\_ Speech and Language

\_\_\_ Occupational Therapy

\_\_\_ Physical Therapy

5. Did screening/evaluation result in an Individualized Education Plan (IEP) for your child?

\_\_\_ YES \_\_\_ NO

(If YES, then meeting to review IEP will be necessary before enrollment at Saints Philip and James)