



## PIQUES Supplemental Education Services (SES) Enrollment Form

### Directions:

1. Complete **ALL** of the information below.

***AN INCOMPLETE FORM MAY RESULT IN THE DELAY OF SERVICE.***

2. A Parent/Guardian **must** sign this form. Services will not be approved or provided without a signature.

3. Return this form in one of the following ways:

a. Drop off, Fax, Email or Mail to: PIQUES, 39 Harvard St., Laconia, NH 03246.

b. Give form to your student's school office and they may forward to the PIQUES office.

**ENROLLMENT DATE:**    /    /

### PLEASE COMPLETE THE FOLLOWING SECTION:

Student Information
<b>Last Name:</b>
<b>First Name:</b>
<b>Date of Birth:</b> /    /
<b>Current Grade:</b>
<b>School Attending:</b>
<b>Classroom Teacher:</b>

Parent Information	
<b>Last Name:</b>	
<b>First Name:</b>	
<b>Home Address:</b>	
<b>City, Zip:</b>	
<b>Phone 1:</b> (    )	<b>Type:</b>
<b>Phone 2:</b> (    )	<b>Type:</b>
<b>Phone 3:</b> (    )	<b>Type:</b>
<b>Email:</b>	
<b>Preferred method of contact:</b>	

*We cannot enroll your child unless this information is complete.*

### CONSENT TO RELEASE INFORMATION

By signing this form, you authorize the Laconia School District to release written and verbal information about your child to PIQUES. These records will be used to prepare a Learning Plan for your child. Further, you understand that your child's teachers may give test scores and other educational information about your child to this provider for the purpose of providing improved services to your child. The information to be released:

- Official School Records (*including name, address, birth date, sex, grade level, grades, attendance*)
- Standardized Test Results
- Special Education Records (*including related services*)—current Individual Education Plan (IEP) & Special Education Evaluation.

I understand that this consent takes effect the day that I sign it and that I may change this consent at any time by sending a written notice of the change to the releasing school.

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

*“Providing EXTRA personalized academic instruction beyond the school day.”*