

Intake Form

Student name:

Student grade:

Students current school and grade:

Student email address (if applicable):

Student cell phone (if applicable):

Parent/Guardians' names:

Best email for parents:

Best cell phone for parents:

Please briefly describe why you have sought my services:

What are your child's strengths, academically, socially and otherwise?

What are your child's challenges, both academically, socially and otherwise?

Please state the goals for your student in their work with me.

If your child has had a psychoeducational or neuropsychological evaluation, please provide name and date of evaluation and briefly describe major findings (no need to list strengths, challenges if they are the same as list above), such as diagnosis and any accommodations.

I have read the policies found on the “Policies page” and, if I should engage the services of Epstein Education, I agree to the terms stated therein.

Name _____ (by typing your name you agree to the above).

Date_____