Fairview Elementary School

Ph: 604.465.9331/ Fax: 604.465.7856

Student's Name:_____ **Current Grade:**_____

Current Teacher's Name: _____

We are beginning to create our classes for next year. Please be assured that staff devote considerable time, care and attention to this process. This very complex and lengthy responsibility occurs over several weeks and continues into September when class placements are finalized. Throughout the year, there have been many opportunities for parents and teachers to discuss each child. Staff work together to consider the following criteria very carefully: **social emotional skills and relationships**, as well as **learning styles**, **strengths, and needs**. Our goal is to create safe and engaging inclusive classrooms that balance these factors, as equitably as possible. If you feel there is further information to consider about your child, you may submit input to the principal in writing using this form or via email to **laura_bruce@sd42.ca** by May 10, 2024. **Please refrain from requesting specific teachers or peers by name**.

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Parent Signature:_____ **Date:**_____