

School District #58 (Nicola-Similkameen)
Local Education Agreement
School / Community Support Form

Name of Student: _____ Date of Birth: _____	
School: _____	Band: _____
Grade Level: _____	Teacher/s: _____
Parents: _____	FNSW: _____
Education Coordinator: _____	

Education Coordinator Contact # / Email:

Caregiver Information About Student:

Contact # / Email: _____

School Information About Student:

Education Coordinator Information About Student:

Student's Strengths, Interests and Needs:

Coordinated Services (learning plan, learning assistance, counselling, community support/services, SPED services):

Transition Needs (school orientation, code of conduct, introduction to teachers, extra-curricular activities, peer / adult support):

Other / Key Points to Be Considered:

High Risk: Low Risk:

Review Date: _____

Signature: _____