



2. Are there any particular concepts, topics, themes, etc. you would like us to focus on?

3. How will teachers be participating in the program? Will they be active participants to enhance their professional relationship with students, or active observers to help highlight class successes, strengths and positive developments?

4. What would make this experience a total success for your school?

5. What would make this experience a total success for your students?

6. Are there any medical or behavioral issues of which we should be aware? Include known allergies so that we may prepare.

7. Please share with us any other information that you think might assist us in planning the best possible program for your group.

\*This document will help us greatly in planning your program. Please return this form to Lyndsey Smith, Lakeside Classroom Coordinator, via mail or fax as soon as possible. Thank you!