

Bridge Valley STUDENT INFORMATION FORM

Please email as an attachment or send in a printed copy to Mrs. Gale hgale@cbsd.org

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SUBMIT BY Friday, May 2, 2025

Every year is a new opportunity to make friends and build upon established relationships. Our goal is to ensure that each child is in a class that will engage them in positive and academically rich experiences.

Student's Name: _____

Parent Name (person completing the form): _____

Current Grade: _____ Current Teacher: _____

Do not request a specific teacher.

We use the current form in supporting placement decisions. We do not go back multiple years.

My child does best in a classroom that...

Additional information you ask that we consider, this may include strengths, challenges, and past experiences:

Thank you