

Sample

RESTRICTED

_____ **School**
Summary of Support for Student (20__ / ____ School Year)

Name of Student: _____ Class: _____

The major support provided for the above student from _____ (month/year) to _____ (month/year) is as follows:

(I) In-class support

(II) Support outside classroom (e.g. academic, social, adjustment support)
Name of group: _____
Support/Training focus: _____
Details: Starting from _____, _____ session(s) per week, _____ minutes per session, _____ session(s) in total

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Support/Training focus: _____
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(III) Homework accommodation (Subject teacher(s) will contact parent(s) for specific arrangements)
Subject(s): _____
Details: _____

(IV) Assessment accommodation

(V) Complement by parent(s)

(VI) Remark(s)

