



# Survey on "Students with Special Needs/Disabilities"

**YEAR**

<b>PARISH</b> name & location	<input type="text"/>
Special Needs <b>Contact Person's</b> name	<input type="text"/>
Phone	<input type="text"/>
E-mail	<input type="text"/>



On the registration form is there a place for parent/guardian to indicate a special need/disability or disabilities?  **YES**  **NO**

## Types of special needs/disabilities that students in your religious education program have

Disabilities	Number of students by Grade Level											
	1	2	3	4	5	6	7	8	9	10	11	12
ADD/ADHD												
Autism												
Hearing impairment (including deafness)												
Visual impairment (including blindness)												
Deaf and blind												
Emotional disturbance												
Development disability												
Orthopedic impairment												
Specific learning disabilities												
Speech or language impairment												
Traumatic brain injury												
Special Diets (Including food allergies)												
Other medical condition												
Other health impairment ( e.g. chronic or acute health problems such as asthma, diabetes, epilepsy, hemophilia, etc.)												

## Indicate how students with special needs are instructed in religious education programs (check all that apply)

<input type="checkbox"/> Inclusive education (students receive instruction and support services with regular classes)	Number of students included:
<input type="checkbox"/> Separate religious education classes for students with special needs	Number in separate classes:
<input type="checkbox"/> Other (Please specify and describe briefly)	Number of students in other:

**Please return to:**

Office of Religious Education & Catechesis  
197 E. Gay St.  
Columbus, OH, 43215

Phone: (614) 221-4633  
FAX: (614) 241-2563