



Reading • Writing • Succeeding

Center for Literacy and Reading Instruction

17 Baldy Hall, University at Buffalo
Dr. Mary McVee, Director

716.645.2470
Dr. Ashlee Campbell, Assoc. Director

APPLICATION FOR SERVICE

Complete, sign in two places and return to above address

Student's Name _____ Gender _____ Age _____ Birth Date _____ Grade _____

School Name _____ School Phone _____

School Address _____

Classroom Teacher _____ Principal _____

Resource Teacher _____ Reading Teacher _____

Reason for Application _____

PERMISSION TO OBTAIN AND TRANSMIT INFORMATION- OPTIONAL

The Center for Literacy respects every child's and every parent's right to privacy and will not proceed to communicate with others until permission is granted. By signing below, you grant the UB Center for Literacy staff permission to obtain information from school officials, physicians, and other agencies you think we should contact (indicate below). Furthermore, work completed by the Center will be beneficial to your child's classroom instruction, thus your signature grants the Center permission to send a copy of reports to your child's school (and other agencies you indicate).

Other agencies from whom we might obtain information and to whom we should send information:

Family Physician _____ Phone _____

Psychologist _____ Phone _____

Other _____ Phone _____

Name/address of agencies (other than the school) to whom a copy of your child's UB Center for Literacy report should be sent:

Parent Sign Here

Signature of Parent or Legal Guardian

Date

(CONTINUED ON NEXT PAGE)

STATEMENT OF CENTER PROCEDURES

Please sign after reading

In bringing your child to the UB Center for Literacy and signing below, you indicate that you are aware that the Clinic uses supervised graduate students to perform most Center duties, that other students may observe that work, that your child may be videotaped for teaching purposes, and that your child may be included in research related to reading teaching methods. You further realize that all information is confidential and will be released only on receipt of authorization (below) from parents.

Tuition and Attendance Policies

We will not prorate or refund tuition for vacations or time missed. We will only refund tuition for days that CLaRI is expectantly closed or a teacher is not available. It is not possible to reschedule or make up tutoring/evaluation days as CLaRI clinicians participate in the evaluation/tutoring as part of a university course with set days and times. Excessive absences will result in dismissal from the program.

Parent Sign Here

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Signature of Parent or Legal Guardian

Date