



## School District Referral for Private or Alt Ed. Placement

Referring District:			
District Representative Contact information			
Name	Email	Phone	
Referral Date:		Date placement is needed:	
Student Name:		Student Grade:	
Parent/guardian name			
P/G phone number And email addresses:			
MET area (s) of Eligibility Alt Ed not required			
MET Date: (attach Copy) Alt Ed. Not required		IEP Date: (attach Copy) Alt Ed. Not required	
Reason for Current Referral:			



*Rachel Parson, M Ed*  
**Principal**  
 Prestige Day School  
 20395 E. Rittenhouse Rd.  
 Queen Creek, AZ 85142  
 PH: 480-987-5891  
 cell: 480-577-4890  
 E: rachel.parson@rop.com

