



INSTRUCTIONS: This form must annually be completed by the school and submitted to the department by March 1st. The school must then provide it, at the time of application to the school, to each child or the child's parent on behalf of the child who applied for a special needs scholarship.

Required by s. 115.7915(6)(g), Wis. Stats.

Name of School	Address <i>Street, City, State, Zip</i>	School Year
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SPECIAL EDUCATION PROGRAM PROFILE

Describe the school's special education program, including the methods of instruction that will be used by the school to provide special education and related services to the child.

STAFF QUALIFICATIONS

Describe the qualifications (including degrees and licenses held) of the teachers and other persons who will be providing special education and related services to the child.

Private School Contact <i>First and Last Name</i>	Title
Contact Telephone <i>Area/No.</i>	Contact Email