

School Information Form

Please send this form to **Spruce Lake Outdoor School** at least <u>TWO weeks prior</u> to your arrival.

School			Progra	m Dates	S					
Staff In	formation		8	tudent	Numb	ers (Please i	temize by gra	ade when	applicable.)	
	Coordinating tea	cher(s) name(s):	-	<u>Grade</u>		<u>Female</u>	<u>Grade</u>	<u>Male</u>	<u>Female</u>	
	Number of additi	onal participating staff and adults:	-							
	Male	Female	_							
Spiritu	al Themes, Top List any themes	oics & Biblical Passages or topics you will be including during	g your time							
Specifi	c Objectives for Please include s	or Program chool, academic, spiritual and socia	al objectives	S						
Prayer	Requests List any specific	prayer concerns in relation to your s	school and/	or progra	am					
In orde		better, please indicate if anyo	ne in you			-		_		
	☐ Anxiety Disorder ☐ Autism ()				∟ P	Physical Limitation (specify) o Adult				
	Learning Disabilities (specify)		A C			o Stu	udent			
	°				□ ⊤	eam Conflict	/Cliques			
	○ Listening	Difficulties	2 K		LJ U	Inkindness /	Disrespect	(pattern/	continued)	
	•	significant event in the life of a child	d that may	affect the	sir Spru	ce Lake evne	rience?			
	is there a recent	significant event in the me of a crim	a triat may t	ancot the	л орга	ce Lake expe				
Notes a	and/or commer	nts for Spruce Lake staff								