



Holy Family Catholic High School

Special Education Services

In order to best facilitate special education services for your child, please complete and return this form, along with all necessary application materials, to Holy Family Catholic High School.

_____ My child has an active Individualized Education Plan (IEP).

_____ I would like my child to continue to receive special education services at Holy Family Catholic High School.

Primary Disability _____

Secondary Disability _____

Current Number of Service Minutes Each Week _____

Please send a copy of your student's current IEP to Holy Family by May 25.

_____ I do not want my child to receive special education services at Holy Family.

Name (Please Print) _____

Address _____

Signature _____ Date _____

Please send the requested materials to:

Holy Family Catholic High School
8101 Kochia Lane
Victoria, MN 55386
School: (952) 443-4659 • Fax: (952) 443-1822
www.hfchs.org