

SEARCH & TEACH



Dear Parents,

Individual Academic Support at SCCS provides a special program called **SEARCH & TEACH**. It will assist your kindergarten or first grade student by strengthening their visual, auditory, and motor skills to experience success in their academic career.

The **SEARCH** portion of the program is a one on one evaluation designed to identify perceptual weaknesses that may contribute to difficulty acquiring the basic skills necessary for learning. If difficulties are identified, parents have the opportunity to have their child participate in the **TEACH** program which will improve each area. The **TEACH** program is a series of one-on-one sessions specially designed for each child's identified needs. This program has had wonderful success.

To participate in the program there is a fee of \$25 for the **SEARCH** portion of the program. Please include the payment with the form below. This fee includes the 25 minute test (scheduled during school hours, with the teacher's approval), scoring, and consultation with you to explain both the test and the results (scheduled at your convenience).

The **TEACH** program involves having your child meet with me 2 or 3 times a week either before, during, or after school, for thirty minutes to perform tasks (games) that will strengthen their visual, auditory, and motor abilities and improve their learning capabilities. There are two prices depending on your child's SEARCH score:

- Level 1 - \$100 per month – 4 hours a month (except vacations)- 1 hour a week
- Level 2 - \$150 per month – at least 6 hours a month(except vacations)- 1 ½ + hours a week

If you are interested in this program please fill out the form and return it to your child's teacher, or drop it off in the main office. Please feel free to contact me at my office (next to the Business Office), or by phone if you have any questions.

Thank you,
Linda Fox
SCCS Individual Academic Support Director
(661) 252-7371 ex.216

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Yes, I would like my child, _____, to participate in the SEARCH portion of this program. I have included \$25 with this form.

The best way to contact me is at: (home) _____ (cell) _____

My child's birthday is _____ (M/D/Y)

My child is in (Please check one): Kindergarten: ___Dennis ___Steinbock
1st grade: ___Flores

Parent's Signature _____ Date _____