



INCLUSION SUPPORT FORM

The City of Santee Community Services Department is committed to serving the needs of everyone in the community through inclusive programming. We strive to provide an atmosphere in which people with and without disabilities can interact, play, and socialize with their peers in an all-inclusive, supportive environment that understands behavioral and medical accommodations.

The City of Santee Community Services Department will attempt to provide inclusion assistance for persons with disabilities to enable them to participate in Recreation Programs, with 3 weeks prior notice, in accordance with the City of Santee inclusion guidelines.

Participant Info		Today's Date
Name		Date of Birth
School		Grade
Name of Parent / Guardian		
Phone	Email	

Emergency Contact (Parent / Guardian will be contacted first)

Name	
Phone	Email

Accommodations

Does your child have: <input type="checkbox"/> IEP/504 Plan <input type="checkbox"/> Asthma Action Plan <input type="checkbox"/> Seizure Action Plan <input type="checkbox"/> Allergy Action Plan <input type="checkbox"/> Meal Accommodation Plan <input type="checkbox"/> Other <input type="checkbox"/> None of the Above	
Details: Is your child under the care of a Specialist / Aide? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, Specify:	
Medication needed during care: <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, Specify:	Allergies: <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, Specify:
*Medical Authorization form needs to be completed Type of Diagnosis or Disability (please explain):	
Severity: <input type="checkbox"/> High Functioning <input type="checkbox"/> Moderate <input type="checkbox"/> Low Functioning	
Special Medical Needs:	
What accommodations can we help your child with:	



Behavior Management

Inappropriate Behaviors (hitting, bad language, listening, flight risk, etc.)	
Triggers	
What methods work to prevent/deescalate the behavior?	
What comforts/helps your child?	
Does your child do well in group settings? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Specify:	Do you/your child have any concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Specify:

Additional Information

Is there anything additional you would like to share?
