



compassion
network
Outreach of CITYSER>E

BOOST! Homework Help Student Intake Form

Date: _____

Student Name: _____ Nickname: _____

Gender: Male Female Age: _____ Grade: _____

Parent Name: _____

Household Income: _____ per month per year

Phone Number: _____ Email: _____

Alternate Phone: _____

Physical Address: _____

Parent's Primary Language: _____

School Child is Attending: _____

Current Grade: _____ Current Teacher: _____

What subjects does the student need help with? English/Writing Math
Reading

What is student's first language? Spanish Farsi Mandarin Other

Has the student had homework help before? Yes No

If yes, when: _____

Do any of the following apply to your child?: IEP 504 Plan Attend Intervention
class? Details: _____

Does your child have any food allergies? Yes No If YES, please specify below

How can we best help your child with their homework ~ What do they need help with the
most? _____