



Technical Assistance Request Form (this form must be completed by school or agency personnel only)

Thank you for your interest in receiving CARD services. **Please submit requests for service at least 4 weeks in advance.** All requests will be reviewed by administration and assigned to the appropriate clinician(s). CARD services are free of charge.

Technical Assistance: Assistance given to classroom/agency staff, support staff, or administration in a variety of areas including instructional strategies, behavior management, communication training, etc.

Today's date: _____

Preferred day(s): _____

Preferred time(s): _____

Name of agency/school: _____

Name and title of contact at school/agency: _____

Address: _____

Contact number: _____ Email Contact: _____

Technical assistance/consultation is requested for:

Individual Student(s)/Client(s)

Entire School or Program

Specific Classroom(s)

Type of Technical Assistance needed:

Accommodations and Supports

Curriculum

Inclusion Strategies

Behavior Strategies

Environmental Arrangement

Other: _____

Name of Client/Student (if applicable): _____

Release of information completed by parent (only if requesting technical assistance for a specific child): Yes No

Name & Title of Administrator: _____

Signature (required): _____

Please fax this form to one of the following:

For Monroe & Miami-Dade Requests (305) 284-6555

For Broward Requests (954) 262-2851

OFFICE USE ONLY

Date received _____

Date assigned _____

Assigned to _____

Disposition: _____
