

Support Services Qualification Form

This program is for the purpose of providing assistance (when possible) to eliminate barriers to student's educational program.

Student Name: _____ Age: _____ Date of Birth: _____

NMSC Program: _____ Sending School: _____

Parent Name: _____ Phone #: _____

Purpose of need, please explain: _____

Does anyone in your household receive the following?

☐

TANF

☐

Basic Food/ Food Stamps

☐

Medical Coupons

Please attach documentation.

Tumwater School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression, gender identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employee(s) has been designated to handle questions and complaints of alleged discrimination:

Civil Rights Coordinator: Assistant Superintendent Shawn Batstone

shawn.batstone@tumwater.k12.wa.us

621 Linwood Ave SW Tumwater WA 98512 | (360)709-7030

Title IX Officer: Assistant Superintendent Shawn Batstone

shawn.batstone@tumwater.k12.wa.us

621 Linwood Ave SW Tumwater WA 98512 | (360)709-7034

Section 504 Coordinator: Director Kelli Ehresmann

kelli.ehresmann@tumwater.k12.wa.us

621 Linwood Ave SW Tumwater WA 98512 | (360)709-7040

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

New Market: _____ Date: _____