Perkins
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SCHOOL FOR THE BLIND

Required Paperwork Checklist

Please send __all__ available educational, clinical, and medical reports. Place a checkmark in the "Enclosed" column next to each report that you include in your application packet. Place a checkmark in the "Not Enclosed" column for all reports that are not applicable or you are unable to send at this time, and briefly explain in the "Comments" column. List additional reports included under "Other." **Please use the other side of this form to list all medical reports. __Please return this form with the rest of your application packet.__**

Report - Educational / Clinical	Enclosed	Not Enclosed	Comments
Required Paperwork Checklist			
Contact Sheet			
Completed *Evaluation/Admission Information Form*			
Current IEP or ISP			
Progress Reports			
Teacher of the Visually Impaired			
Educational			
Psychological			
Speech and Language			
Occupational Therapy			
Physical Therapy			
Orientation and Mobility			
Behavioral			
Ophthalmological			
Low Vision			
Audiological			
Social Service			
Video of the Student			
Other:			

__Please list all medical information on the other side.__