



C.J. SKATEBOARD PARK & SCHOOL - Special Needs Programs

Initial Consultation Form

No obligation phone consultation for initial assessment. Download and complete our Special Needs Program Formal Assessment form at www.cjskateboardpark.com/snprogram. The form will be submitted CONFIDENTIALLY to the Special Needs Board Committee Chair and Jay Mandarino, Founder and CEO of C.J. Skateboard Park & School. If we feel our program will truly benefit the applicant, we will arrange an appointment for the applicant and his/her family or caregivers to visit the park for a formal assessment.

Applicant's name: _____ Please check program(s) you are interested in:

Applicant's parent/legal guardian's name: _____ Skateboarding

Email: _____ Scootering

Tel. - Home: _____ Cell: _____ Other _____

Applicant's medical diagnosis(es): *Please leave blank if there are none.* _____

What special accommodations would our instructors need to provide? *For example: One-on-one lessons, more quiet environment, etc.* _____

Is the applicant comfortable taking lessons in a group or with a group working nearby? Yes No

Tell us about the applicant's experience level at the sport of interest (ie. skateboarding, scootering, etc.). *For example: How many years have they been doing it? What kind of tricks or riding do they do? Brand new to it and want to learn?*

What are the main goals for the applicant? *For example: Learning to skateboard/scooter, working on balance and strength, experience learning in a group environment, learning to be more independent at sport of interest, etc.*

Date of Assessment: _____ Assessment by: _____

C.J. Staff Member

Date of Review: _____ Reviewed by: _____

Jay Mandarino

Recommendations: Proceed to formal assessment stage _____

Special Needs Board Member

Require more information from applicant

Unfortunately applicant's needs and goals cannot be met by C.J. Skateboard Park & School

Comments: _____

