**Student Consideration Form**

Your class is scheduled to visit the library on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, periods \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. To help us better serve your students, please answer the following questions.

***Please indicate class periods for any special considerations needed.***

Are there any special accommodations that need to be made for any students?

Do we need to prepare alternate materials or instruction for any students?

Are there any behavioral issues we should know about in advance?