



Student Name: _____ Male Female

School Name: _____ Grade: _____

Request For: _____ Request Date: _____

Shoes, _____ Socks, size _____ No-show ankle

Underwear, size _____ briefs boxers boxer briefs

bikini boy shorts

Bras, _____

Shorts, _____

Pants, _____

Shirts, _____

Hoodie, _____

Coat, _____

Hat/Gloves _____

Other**** _____

Brief Child/Situation Background: _____

Referring Staff Member: _____

Nurse/Counselor Name: _____

Needs requests can also include any of the following items:

- | | | |
|--|---------------------------|---------------|
| -Soap | -Deodorant | -Lice Shampoo |
| -Toothbrush/Toothpaste | -Tampons/Sanitary napkins | -Hairbrush |
| -Alarm clock | -Shampoo | -Conditioner |
| -Laundry soap | -Glasses | -Haircut |
| -Gas card for transportation to doctor, dentist, or pre-school/school registration | | |
| -Medication for conditions affecting the classroom (inhaler, etc.) | | |

******Please note that other items can be requested and may or may not be funded on a need to need basis.**