Anne Bellefeuille, Ph.D. abell@landmarkschool.org

(978) 626-1105

Psychoeducational Assessment Authorization

support/accommodations servi I understand that this testing v	ces in college. I un vill not be used by	derstand that I w colleges for adn	ill receive a written summary nission purposes. I understar	nd that the report will focus on
documenting continued areas needed in college.		ensure that I/m	y child continue to get the	supports and accommodations
	Bellefeuille to subr	mit the assessme	ent to the Registrar's office	and Guidance department of
The transmission of informa appropriate box if you autho			guaranteed to be secure or pripsychoeducational report:	vate. Please check the
By fax By email	□yes □yes	□no □no		
I authorize Dr. Bellefeuille to performance in school to obtai				Landmark School staff about Yes No
Student's Name:		Dar	te of Birth:	
Signature of Parent/Guardian:			Signature of Student:	
Date:			(Required for student	ts 18 years of age)
Name of academic advisor:				
Parent/Guardian's phone numb	oer:			
Parent/Guardian's email addre	ss:			
The cost of a Psychoeducation Achievement battery (such as ' through June 30, 2024). An ad	WIAT-IV) and a co	mprehensive repo	ort for college accommodation	s is \$ 1800.00* (price effective
Check Credit Card		able to Anne Bel nvoice will be en	lefeuille, Ph.D.) nailed to you to be paid secur	ely online)
* Payment is due prior to or or full payment has been received				
I understand that Psychoeduc codes associated with psychoe			covered by health insurance submitted to insurance.	

Please return via email or via mail to the address below:

Anne Bellefeuille, Ph.D. Landmark School - Administration P.O. Box 227 Prides Crossing, MA 01965-0227