## **Museum School Classroom Information**

School:				
Address:				
Dates Attendin	g:			
Teachers' Nam	es	Email Address	es	Class Size
(Please indicate the team leader with an "X". A cell phone number is helpful.)				
Special Needs/disabilities/allergies (peanut butter, milk, wheel chair, etc.):				
List any students that cannot be photographed and their teacher:				
Note any sched	ule changes needed:			
Monday -				
Tuesday				
Wednesd				
Thursday	-			
Friday -				
Questions/com	ments:			