

# Technical Assistance Request Form for School/Agency

**Technical Assistance (TA): Assistance given to classroom/agency staff, support staff, or administration in a variety of areas including instructional strategies, behavior management, communication training, etc.**

Thank you for your interest in our services. All requests will be reviewed by administration and assigned to the appropriate professional(s). UF CARD Staff will contact the school/agency to discuss your needs.

**INSTRUCTIONS :**

1. Complete all required fields.
2. Include signatures from parent/guardian and school administrator.
3. Fax to UF CARD 352-846-3703.
4. Forward a copy to your district ESE administrator as needed.

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|--|------------|--|
| 1. <input type="checkbox"/> School/Agency initiated request for technical assistance/consultation. | or         | <input type="checkbox"/> Family initiated request for observation and collaboration. |
| 2. Name of School/Agency:  | 3. County: |  |
| 4. School/Agency contact person:   |            |  |
| 5. School/Agency contact number and email address:   |            |  |
| 6. Name of child (if applicable):  |            |  |
| 7. Parent/Guardian's Email Address (to share observation notes/recommendations):                   |            |  |
| 8. Teacher's name (if applicable) and email address:   |            |  |
| 9. Name & title of building-level administrator:   |            |  |
| 10. Preferred dates and times for consultation:  |            |  |
| 11. What are you asking CARD to help you with?   |            |  |

*I give permission for school and CARD to collaborate, exchange information, and for CARD staff to observe my child.*

*I give permission for CARD to observe in the school and collaborate with school faculty & staff.*

\_\_\_\_\_  
Parent/Guardian Signature                      Date

\_\_\_\_\_  
Building-Level Administrator Signature      Date

**University of Florida**  
**Center for Autism and Related Disabilities**  
4101 NW 89th Boulevard  
Gainesville, FL 32606  
1-800-9-AUTISM or 352-265-2230  
(352)846-3703 fax  
card-info@ufl.edu  
www.card.ufl.edu  
www.facebook.com/UFCARD  
twitter.com/UFCARD

|                       |             |
|-----------------------|-------------|
| ***OFFICE USE ONLY*** |             |
| Date received:        |             |
| Date assigned:        |             |
| Assigned to:          | REV. 4/2021 |

*CARD serves individuals with Autism Spectrum Disorder, Autistic-like Disorder, Dual Sensory Impairments, or Sensory Impairments (vision and/or hearing) with other disabling conditions. CARD services are free of charge.*