Harding Academy this semester. Therapy is scheduled on Tuesday and Thursday at _______.

Those students receiving therapy have been referred based on factors including previous articulation screenings, teacher referrals, past therapy, and the severity of the problem.

The times are determined by class and school schedules and the availability of student speech clinicians and licensed, certified speech-language pathologists to supervise.

If you approve of your child receiving therapy, please complete the following and return this form to the Harding Academy office as soon as possible. You will receive a copy of our treatment goals in the next several weeks and a copy of our results at the end of this semester. If you have specific questions about therapy, please call Dan Tullos.

______________________________
Student Clinician

Daniel C. Tullos, Ph.D., CCC-SLP
Clinical Supervisor
501-279-4633

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Parent/Guardian