

BEMIDJI REGIONAL INTERDISTRICT COUNCIL

 Bagley PO Box 974 Kelliher

 Blackduck Bemidji, MN 56619 Lake of the Woods

 Cass Lake-Bena Phone 218-751-6622 Laporte

 Clearbrook-Gonvick Brenda R. Story, Executive Director Littlefork - Big Falls

 Mahnomen FAX Number 218-751-6625 Waubun-Ogema

 Northome-Indus [www.bric-k12.com](http://www.bric-k12.com) Admin Office-Bemidji

**Documentation of ADHD Diagnosis Form**

Date of request:

Request sent to: at

Please provide the information requested below and return this document at your earliest convenience in the envelope provided. *Authorization to Release Information included.*

Student Name: Date of Birth:

 (mm/dd/yyyy)

Diagnoses:

Prescribed Treatment Plan:

Additional Comments:

Signature of Licensed Physician, Mental Health or Medical Professional licensed to diagnose the condition:

 Date

Thank you for your timely response!

Respectfully,