



# Dyslexia Foundation of Memphis



APPLICATION FOR REFERRAL OF TESTING

Full name of child \_\_\_\_\_ Birth Date \_\_\_\_\_

Does your child wear glasses? \_\_\_\_\_ Dominant Hand \_\_\_\_\_ Grade \_\_\_\_\_

School Attended \_\_\_\_\_ School to be attended next year \_\_\_\_\_

\_\_\_\_\_ Has child been retained? \_\_\_\_\_

Is your child on medication? \_\_\_\_\_ If so, what? \_\_\_\_\_

Has child received special help outside classroom? \_\_\_\_\_

Please specify type of help \_\_\_\_\_

Full name of head of household where child resides:

\_\_\_\_\_  
(First) (Middle) (Last)

Mother's name \_\_\_\_\_

Child's address \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

Home phone \_\_\_\_\_ Business phone \_\_\_\_\_

Has child been tested previously? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_

By whom? \_\_\_\_\_ (Test results should be within the past 2 years)

Results \_\_\_\_\_

By whom were you referred to the Foundation? \_\_\_\_\_

Enclose a check for \$100.00 payable to The Dyslexia Foundation of Memphis. This Referral Fee is **NOT REFUNDABLE**. Also, please enclose a copy of your child's last evaluation.

Completed application with check should be mailed to:

*Dyslexia Foundation of Memphis*

Paula Landrum

4901 Montgomery

Millington, TN 38053

\_\_\_\_\_  
Signature of Parent or Guardian

Services of The Dyslexia Foundation of Memphis are provided without regard to race, creed, national or ethnic origin

## Dyslexia Foundation Testing Program

The Dyslexia Foundation of Memphis provides a screening test for dyslexia. This is actually a battery of tests to determine if a student's academic difficulties stem from dyslexia. This is **not** a full-scale psychological evaluation. However, it is detailed enough to identify a student's proficiency in dealing with language, both oral and written. The battery includes tests in the areas of:

- Short term memory
- Speech irregularities
- Accuracy and fluency of reading
- Reading comprehension
- Visual perception and processing
- Auditory perception and processing
- Eye / hand co-ordination

The cost of the evaluation is \$225.00 which includes:

- Testing by a trained examiner
- Appointment with a licensed psychologist
- Interpretation of test results

If a student has already been tested, there is only a \$100.00 referral fee. A copy of the previous evaluation, which should be no more than two years old, should be submitted with the fee. This fee covers:

- Review by a licensed psychologist
- Referral to program for eligible students

Call the Dyslexia Foundation of Memphis message center for additional information at 901 373-7218