** REQUEST FOR ASSISTANCE-STUDENT SUPPORT REFERRAL**

**STUDENT:** **GRADE:** **BIRTHDATE:**

**PERSON MAKING REFERRAL:**

**REASON FOR REFERRAL:**

**\*\*DIRECTIONS:** To be completed by referring person. Check all that apply, and submit completed form to Yvonne Cannon, Reading Interventionist.

**STUDENT STRENGTHS: CLASS PERFORMANCE PERSONAL BEHAVIORS**

 Peer Social Skills Cannot Work Independently Anxious

 Cooperative Gives Up Easily Lethargic

 Sense of Humor Needs Constant Reassurance Crying

 Doesn’t Give Up Drop in Grades Extreme Negativism

 Verbal Skills Short Attention Span Unexplained Grief/Despair

 Leader Among Peers Sloppy or Incomplete Work Lacks Self Confidence

 Engages Adults Always Behind in Work Mood Swings

 Academic Skills Low Achievement Unrealistic Goals/Thinking

 Music, Dance, Art Lack of Motivation Seem Depressed/Withdrawn

 Motivated Needs Constant Redirection Manipulative

 Positive Attitude Poor Organizational Skills Stares Off/Daydreams

 Other: Other: Apathetic

 Other:

**DISRUPTIVE BEHAVIOR: PHYSICAL SIGNS: OTHER ISSUES:**

 Center of Attention Avoids Eye Contact Family Issues:

 Tattles Lack of Coordination (specify)

 Destroys Other’s Property Muscular Twitches/Tremors Attendance

 Defiance of Rules Poor Hygiene/Grooming Emotional Health

 Constant Discipline Problem Drowsiness/Sleeping Physical Health

 Blaming/Denying Unexplained Injuries Other:

 Fighting/Outbursts Extreme Weight Loss/Gain

 Cheating/Lying Fine Motor Skills Difficulties

 Throwing Objects (buttoning/zipping/paper/pencil/cutting)

 Obscene language/gestures Over Activity/Hyperactivity

 Other: Other:

CONTINUED

**ACADEMIC FUNCTIONING** **BEHAVIORAL FUNCTIONING** **SPEECH/LANGUAGE FUNCTIONING**

 Concerns with: Concerns with: Concerns with:

 Reading Recognition Following Instructions Fluency (repetition/avoidance/

 Reading Comprehension Disagreeing Appropriately prolongation of words)

 Math Calculation Accepting “no” for an Answer Voice (quality/pitch/loudness)

 Math Word/Story Problems Accepting criticism/consequences Articulation (speech production)

 Spelling Getting Teacher’s Attention Language (comprehension/expression)

 Writing Peer Relations Other:

 Test Taking Inappropriate/Disruptive Noise

 Completing Assignments Out of Place

 Off-Task Negative Physical Contact

Other Helpful Data:

Reading MCA Scores

FAST Benchmark Fluency Scores

STAR Reading Scores

Study Island Data

Accelerated Reading Scores

Summative/Unit Assessment Scores

Spelling Level and Test Scores

Math MCA Scores

Math Fact Fluency Scores

STAR Math Scores

Accelerated Math Data

Summative/Unit Assessment Scores

Completed Intervention Plan Form: Includes two documented research-based interventions carried out for 6 weeks with recorded data. (Both interventions can be done concurrently.)

 Other: Other:

**SCHOOL/CLASSROOM INTERVENTION STRATEGIES:**

Check those you have tried:

 **HELPFUL NOT HELPFUL**

 Talk Privately with Student

 Parent Phone Call

 Parent Conference

 Verbal Reminders

 Standing Close to Student

 Preferential Seating of Student

 Use of Contracts

 Removal of Student from Classroom

 Student Sent to Office

 Detention

 Extended Learning

 Positive Reinforcement

 Planned Time Out

 Progress Reports

 Assign H.S. Peer Mentor

 Behavior Chart towards Goal

 Assignment/Homework Checklist

 Modified assignments

What, if any, additional actions or other strategies have you taken in response to this academic problem and/or behavior?

Have parents/guardians been contacted? No Yes If yes, date contacted:

Is this student receiving services from another agency? (i.e. Social Services, counseling, corrections, etc…) No Yes If yes, specify what service is being received:

Has this student previously been tested for Special Ed.? No Yes If yes, indicate when:

List any other concerns or additional information that may be helpful: