

Confidential: All information must be specific, descriptive, observable, and factual

TEACHER DATA COLLECTION FORM (OPTIONAL)

NOTE: This form should be completed and returned in a sealed envelope to the homeroom teacher, safeguarding the confidentiality of the student.

Student: _____ Grade: _____

Days Absent to Date _____ School: _____

Teacher: _____ Date: _____

Please return by: _____

<i>Subject</i>	<i>Current Academics</i>	<i>Levels</i>	<i>Percentage (%) of Missing Assignments</i>	<i>Last Report Card Grade</i>
Math	At Above Below			
Language Arts/Writing	At Above Below			
Reading	At Above Below			
Social Studies	At Above Below			
Science	At Above Below			

Directions: Circle each item that is of concern to you or that you have noticed. IAT keeps your name confidential when communicating your comments to parents and students.

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Class Attendance	
Frequent Tardies	Frequent Absences
Frequent requests to leave class	Truancies

Academic Performance	
Consistently low grades	Failure to complete work
Drop in grades	Poor short-term memory
Cheating	Easily distracted
No class participation	Decrease in participation

Disruptive Behavior	
Irresponsibility/Denying Responsibility	Blames peers or teachers
Attention-seeking behavior	Fighting/Sudden outbursts
Verbally abusive to peers or teachers	Extremely negative
Obscene language or gestures	Hyperactive or nervous
Defiance of rules	Appears angry

Physical Symptoms	
Sleeping in class/appears tired	Disoriented
Slurred speech	Deteriorating physical appearance
Frequent complaints of nausea/vomiting	Unexplained/frequent injuries
Frequent cold-like symptoms	Smelling of alcohol or marijuana
Glassy/Bloodshot eyes	

Atypical Behavior	
Change in friends	Change in Behavior
Erratic Behavior	Sexual behavior in public
Inappropriate responses	Defensive
Crying	Appears depressed
Talks freely about alcohol use	Withdrawn
Talks freely about drug use	Difficulty in relating with peers
Talks openly about sexual activity	

Problems at home or with peers	
Family problems	Peer problems
Drug problems in family	Alcohol problems in family
Runaway	

What do you see as the student's strengths; including life skills, assets, resources, interests and talents?

Background Data

- | | | | |
|------------------------------|-----|----|------------|
| 1. Has had Reading Recovery: | Yes | No | |
| 2. Has had LLI: | Yes | No | (GRADE:) |
| 3. Has been retained: | Yes | No | (GRADE:) |
| 4. Past plans for success: | Yes | No | (GRADES:) |

AREAS OF CONCERN:

READING

*Attach current running record_____ (text level, accuracy, SC rate, fluency)

*Cues used:

*Cues neglected:

*Analysis of strategy work and fluency:

*Current SRI level:

*Attach AimsWeb Report

WRITING

*Attach current, scored independent writing sample

*Analysis of writing sample:

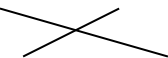
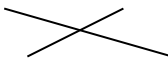
MATH

*Do they know their basic addition facts? Yes No

*Do they know their multiplication facts? Yes No NA

Please attach samples of math work.

Diagnostic Test Scores

Grade	Reading	Math	Writing
K			
1st			
2nd			
3rd			

Achievement Test Scores:

(Please list both score and performance level.)

Grade	Reading	Math
3rd		

WRAT Screening Results

_____ Reading Comprehension _____ Mathematics _____ Nonverbal Reasoning

KBIT Screening Results

_____ Verbal _____ NonVerbal _____ Full Scale

Comments: