

SPELL Referral (Early Intervention)

To complete a SPELL referral please fill out the demographic information below. Review the SPELL Checklist to ensure all required documentation is accounted for. Then submit this form along with required documentation to Dawn Sheen (dsheen@dmail.net) for SPELL review prior to the assessment date. The SPELL committee meets the 1st and 3rd Friday of the month.

Student:		Birth Date:	
Boundary School:		Age:	
Home Language:		Form Completed By:	

Educational History:

How long has the child received services in EI? _____

Has the child had any daycare or preschool in English? _____

Required Information to request a SPELL committee review:

- SPELL Referral Form (This Form)
- Parent / Caregiver Interview
- At-Risk Documentation
 - Areas of concern marked
 - EI/PS transition document that identifies what areas are being proposed for evaluation.
 - IFSP - this will need to be requested and then scanned to the SPELL committee.
 - Referral form with LEA signature

For office use only:

SPELL Reviewer

Date