Note to parents/guardians: You may register for Benchmark Camp without submitting this form. Please have this form completed by your camper’s teacher prior to the language arts screening appointment. Once completed, please upload to your camper’s profile.

Student Name: ___________________________ Date Completed ____________

Current reading level and program used to assess: __________________________

Student’s present instructional reading level (the level at which the student can read with approximately 95% accuracy and 80% comprehension).

Materials: Please list the reading materials the student has used this school year for instruction:

____________________________________________________________________________
____________________________________________________________________________

What are the student’s academic strengths?

____________________________________________________________________________
____________________________________________________________________________

What challenges does the student experience when completing academic tasks?

____________________________________________________________________________
____________________________________________________________________________

Any additional comments: ________________________________________________
____________________________________________________________________________

Name of person completing this form: ________________________________________