



Staff/Agency Referral for Consideration of Evaluation for SpEd Services
(All Grades)

I. Student information:

Student: _____	Age: _____
Teacher: _____	Grade: _____

Has the student been retained?	<input type="checkbox"/> NO <input type="checkbox"/> YES; grade? _____
Student's current attendance:	_____ % days _____ % hours
Has the student been presented to the grade level team.	<input type="checkbox"/> NO → process STOPS until team meeting & interventions, accommodation(s) /modification(s) implemented. <input type="checkbox"/> YES
Parent(s) have been contacted about concern.	<input type="checkbox"/> NO → process STOPS until parent conversation(s) have occurred <input type="checkbox"/> YES
Student concern has been presented to the principal?	<input type="checkbox"/> NO → process STOPS until parent conversation(s) have occurred <input type="checkbox"/> YES
Interventions, accommodations, or modifications have been implemented for 4-6 weeks.	<input type="checkbox"/> NO → process STOPS until parent conversation(s) have occurred <input type="checkbox"/> YES
4 "YES" answers → proceed by filling out a Referral Form on the indicated student.	

II. Individual(s) making referral:

Name	Role:

III. Concern(s) prompting referral:

- Health
- Motor - gross
- Motor - fine
- Vision
- Hearing
- Language
- Speech - articulation
- Speech - voice
- Speech - fluency
- Intellectual/Cognitive
- Adaptive
- Social-emotional/behavioral
- Academic - Reading
- Academic - Writing
- Academic - Math

IV. List Intervention(s) being implemented/accessed: use additional paper if needed.

V. Accommodation(s) and Modification(s) being provided to student:

	Accommodation(s)	Modification(s)
Books	<input type="checkbox"/> Use peer reader <input type="checkbox"/> Highlight important pieces of info. <input type="checkbox"/> Book in audio format <input type="checkbox"/> Provide summaries of chapters	<input type="checkbox"/> Provide alternate book with similar concepts, at lower reading level <input type="checkbox"/> Give page numbers for answers.
Curriculum:	<input type="checkbox"/> Provide vocabulary list <input type="checkbox"/> Alternatives for long writing assignments <input type="checkbox"/> Alternate to reading in front of class <input type="checkbox"/> Provide one assignment at a time	<input type="checkbox"/> Shorten assignments for mastery of key skills <input type="checkbox"/> Shorten spelling tests for functional words.
Environment	<input type="checkbox"/> Cleared work space <input type="checkbox"/> Reduce visual distractions (away from windows, doorways, etc) <input type="checkbox"/> Teacher proximity <input type="checkbox"/> Use of study carrel for independent work <input type="checkbox"/> Additional desk/personal space <input type="checkbox"/> Allow extra breaks <input type="checkbox"/> headphones to reduce noise	
Directions	<input type="checkbox"/> Presented visually <input type="checkbox"/> Highlight key words in directions <input type="checkbox"/> Directions given in small steps <input type="checkbox"/> Number task steps <input type="checkbox"/> Student repeats direction <input type="checkbox"/> Directions read by a peer <input type="checkbox"/> Directions in recorded format	
Grading	<input type="checkbox"/> Daily or frequent grade checks <input type="checkbox"/> Mark correct answers	<input type="checkbox"/> Provide partial grade based on individual performance or effort <input type="checkbox"/> Allow the student to rework missed problems for a better grade. <input type="checkbox"/> Pass/Fail grading <input type="checkbox"/> Average grades <input type="checkbox"/> Weigh daily work higher than tests
Tests	<input type="checkbox"/> Read directions <input type="checkbox"/> Read text <input type="checkbox"/> Separate setting <input type="checkbox"/> Provide answers orally <input type="checkbox"/> Divide tests into smaller sections	<input type="checkbox"/> Use T/F, multiple choice, or matching versus essay <input type="checkbox"/> Grade spelling separate from content <input type="checkbox"/> Provide word bank <input type="checkbox"/> Open book tests
> Content Specific -		
Handwriting	<input type="checkbox"/> Reduce written work <input type="checkbox"/> Fill in the blank for notes <input type="checkbox"/> Teacher provided notes <input type="checkbox"/> Speech to text for long written assignments	<input type="checkbox"/> Grade spelling separate from content
Reading	<input type="checkbox"/> Read text to student <input type="checkbox"/> Extended time <input type="checkbox"/> Highlight key words	<input type="checkbox"/> Provide lower level text
Math	<input type="checkbox"/> Use calculator <input type="checkbox"/> Use graph paper <input type="checkbox"/> Read story problems <input type="checkbox"/> Access to # line, chart, etc <input type="checkbox"/> Reduce number of problems to complete <input type="checkbox"/> Highlight computation signs	<input type="checkbox"/> Group similar problems together <input type="checkbox"/> Decrease skill set

**Adapted from www.PACER.org*

VI. Description of the concerns of the individual(s) that prompted this request (Complete for each area marked in Section III)

Health	
Motor (gross motor and fine motor)	
Vision	
Hearing	
Speech -articulation -voice -fluency	
Language (how they use words to communicate)	
Intellectual/ Cognitive	
Adaptive	
Social- Emotional/ Behavioral	
Academics -Reading -Writing -Math	

VII. Supportive Information - Attach to referral

Elementary (K-5)	Secondary (6-12)
<ul style="list-style-type: none"> ● Concerns in reading - <input type="checkbox"/> provide evidence of reading ● Concerns in writing - provide <input type="checkbox"/> free writing example & <input type="checkbox"/> writing assignment ex ● Concerns in math - <input type="checkbox"/> provide work sample 	<ul style="list-style-type: none"> ● Concerns in reading - <input type="checkbox"/> provide evidence of reading ● Concerns in writing - provide <input type="checkbox"/> free writing example & <input type="checkbox"/> writing assignment ex ● Concerns in math - <input type="checkbox"/> provide work sample <input type="checkbox"/> Student's schedule <input type="checkbox"/> Student's grade card

VIII. Submit to Special Services Office

Name of Staff Receiving: _____ Date: _____