

DATA COLLECTION FOR STUDENT ASSISTANT TEAM (S.A.T.)

STUDENT _____ SCHOOL _____

- MEMBERSHIP:**
- Principal (or designee) - chairperson
 - Classroom teacher
 - Parent(s)
 - Child's current teacher
 - Special education resource teacher
 - Other appropriate staff (Title I, counselor, etc.)

The following information needs to be provided and reviewed at the School Assistance Team meeting. This additional documentation can be valuable in determining the need for continuation, modification, and/or termination of educational interventions or the need to refer for multidisciplinary evaluation. Check mark all that is provided.

I. ELEMENTARY (K-4, K-6)

- _____ Informal reading assessment
- _____ Informal math assessment
- _____ Title I reading or math information
- _____ State testing results from all previous years + Individual Item by Item from the previous year
- _____ If appropriate, behavior rating data (BD referral/ BD concerns)
- _____ Previous formal evaluation (county or independent)
- _____ Current grades (samples of work, writing, worksheets, tests)
- _____ Attendance / discipline reports
- _____ Other assessments (Key Math, WRAT)
- _____ Family structure/ history
- _____ Any additional referral information

II. MIDDLE SCHOOL

- _____ School file (all of the above if available/appropriate)
- _____ Writing samples
- _____ State testing / Explore results
- _____ Current grades (work samples, written work) + final average(s) from previous years
- _____ Attendance / discipline reports
- _____ Behavior rating data (BD concerns / referral)
- _____ Other current assessments (Key Math, pre-post tests, WRAT)
- _____ Family structure / history
- _____ Five (5) year plan

III. HIGH SCHOOL

- _____ School files / records
- _____ EOC exam scores
- _____ Transcripts / grades
- _____ State test scores (ACT, SAT 9, WESTEST, etc.)
- _____ Behavior rating data
- _____ Current Grades

IV. ALL SCHOOLS

- _____ IF PARENT DOESN'T ATTEND, DOCUMENTATION THAT PARENT WERE INVITED TO ATTEND BOTH S.A.T. MEETINGS.
- _____ #3 NOTICE OF INDIVIDUAL EVALUATION/RE-EVALUATION REQUEST

This checklist sheet and the above appropriate documentation must be attached to the completed S.A.T. forms.