

READS, INC.

DATE: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

CURRENTLY ON IEP:      YES    NO   *Please enclose last accepted IEP.*

1.     **REASON FOR REFERRAL:** Including overview of school progress, statement of current standing, and **issues to be addressed**. List specific questions and concerns.

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2.     **EDUCATIONAL HISTORY:** Please complete or attach updated **EDUCATIONAL ASSESSMENT PART A.**

GRADE:

SCHOOL:

TOWN:

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3.     **PREVIOUS EVALUATIONS:** (INCLUDE COPIES IF AVAILABLE)

DATE:

EVALUATOR:

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4.     **ACADEMIC RECORDS:** Please include all academic records Kindergarten to present. **(Report cards and/or transcript)**

5.     **MENTAL HEALTH** - Is there evidence to suggest emotional or mental health factors may be affecting student's performance? (If so, please describe.)

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