

TITLE I LITERACY
CRITERIA FOR KINDERGARTEN SELECTION - **October**
Teacher Use ONLY

Student Name: _____

Teacher: _____

School: _____

Scores used in selecting Kindergarten students for Title I Kindergarten Supplemental literacy program. **(Attach copies)**
(Also complete for JumpStart students who are continuing Title I services.)

1. <u>Observation Survey</u>	Student Score
Letter Identification	_____
Letter Sounds	_____
Hearing and Recording Sounds in Words	_____
Concepts About Print	_____
Name	_____

2. Attach a copy of the MTSS Tier I Baseline Data Form (Google doc)

* Is there a past history of Special Education? _____ Yes _____ No
If "YES" list program and dates.

cc: Title I working file