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| **Letcher County Schools**  **SWAT for an out-of-state transfer** |
| *Response to Intervention (RTI) School Wide Assistance Team (S.W.A.T.) Document*  ***Pre-referral/Referral*** |

Describe any Existing Medical Health Condition Below:

Is Student Currently on Medication?  Yes  No Specify type and dosage:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name *(Last, First, M.I.):* | |  | | M  F | DOB: |  |
| Student ID: |  | | | Grade: | | |
| Parent/Guardian: |  | | | Phone: | | |
| Referral Source: | | |  | School: | | |

Tier Level Two Area of Concern: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(one chart per area of concern)**

(Tier Two interventions are utilized to assist students in the normal course of instruction. These interventions are not as frequent, but data must be collected and analyzed).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Start Date for **EACH** Intervention | End Date for **EACH** Intervention | Baseline Score for **EACH** Intervention | Ending Score for **EACH** Intervention | **Intervention Strategy Administered** | Analysis of Intervention(s) and outcome. (Relevant work samples/data must be provided as evidence with data point chart) |
|  |  |  |  |  |  |
| **Interventionist:** \_\_\_\_General Education Teacher \_\_\_\_ Instructional Assistant | | | | | |
| **Frequency of Services:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Amount of Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Tier 2 Weekly Progress Montoring Letter | | | | | | | |
|  | | | | | | | |
| Name (Last, First, M.I.): | | |  | | M  F | DOB: |  |
| Student ID: |  | | | **Date:** | | | |
| Interventionist: | |  | | **School:** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Area Being Targeted: | Intervention Results: | Weekly % Score: | Target % Score: |
| Reading | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Writing | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Mathematics | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Behavior (Social Competence) | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Communication (check specific focus for interventions)  Articulation  Language  Fluency  Voice | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |

**Behavior Report:**

\_\_\_\_\_\_Stays focused and engaged.

\_\_\_\_\_\_Needs improvement staying focused and engaged.

\_\_\_\_\_\_Interventions are hindered due to disruptive behavior(s).

If you have any questions or concerns, please feel free to contact me.

Thank You,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Interventionist*

Tier Level Three Area of Concern: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(one chart per area of concern)**

(Tier Three interventions are utilized to assist students in the normal course of instruction. These interventions are not as frequent, but data must be collected and analyzed).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Start Date for **EACH** Intervention | End Date for **EACH** Intervention | Baseline Score for **EACH** Intervention | Ending Score for **EACH** Intervention | **Intervention Strategy Administered** | Analysis of Intervention(s) and outcome. (Relevant work samples/data must be provided as evidence with data point chart) |
|  |  |  |  |  |  |
| **Interventionist:** \_\_\_\_General Education Teacher \_\_\_\_ Instructional Assistant | | | | | | |
| **Frequency of Services:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Amount of Time:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Tier 3 Weekly Progress Montoring Letter | | | | | | | |
|  | | | | | | | |
| Name (Last, First, M.I.): | | |  | | M  F | DOB: |  |
| Student ID: |  | | | **Date:** | | | |
| Interventionist: | |  | | **School:** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Area Being Targeted: | Intervention Results: | Weekly % Score: | Target % Score: |
| Reading | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Writing | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Mathematics | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Behavior (Social Competence) | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |
| Communication (check specific focus for interventions)  Articulation  Language  Fluency  Voice | Making adequate progress towards benchmark  Making some progress, but data is inconsistent  Making little or no progress |  |  |

**Behavior Report:**

\_\_\_\_\_\_Stays focused and engaged.

\_\_\_\_\_\_Needs improvement staying focused and engaged.

\_\_\_\_\_\_Interventions are hindered due to disruptive behavior(s).

If you have any questions or concerns, please feel free to contact me.

Thank You,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Interventionist*