

Frenchtown Student Assistance Team (SAT): Request for Assistance

Student Name: _____

Date of Request: _____

Date of Birth: _____

Age: _____

Referring Teacher: _____

Grade: _____

Last Year's Teacher: _____

Vision Screening: _____ (Results/Date)

Hearing Screening: _____ (Results/Date)

Concerns:

☐ Academic –

☐ Social –

☐ Behavioral –

Possible factors contributing to the problem
(ex. social/emotional/familial):

Student strengths/positive attributes:

Additional background information:

List all regular classroom interventions attempted in order to address the concern(s):

Intervention	Duration/Dates	Results

➤ Teachers please bring the following applicable information to the SAT meeting:

- Dibels scores
- MAPS/CRT scores
- Samples of work in areas of concerns

Academic Concerns

Oral Language

- | | |
|---|---|
| <input type="checkbox"/> Poor listening comprehension | <input type="checkbox"/> Articulation errors |
| <input type="checkbox"/> Poor auditory memory | <input type="checkbox"/> Difficulty expressing thoughts |
| <input type="checkbox"/> Simplistic vocabulary | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Stuttering | |

Reading

- | | |
|---|---|
| <input type="checkbox"/> Problems with letter/sound associations | <input type="checkbox"/> Poor reading fluency |
| <input type="checkbox"/> Problems with sight words | <input type="checkbox"/> Poor reading comprehension |
| <input type="checkbox"/> Often guesses at words (strange substitutions) | <input type="checkbox"/> Other _____ |

Math

- | | |
|--|---|
| <input type="checkbox"/> Problems in basic calculation | <input type="checkbox"/> Problems reading graphs |
| <input type="checkbox"/> Confuses + and – signs | <input type="checkbox"/> Difficulty with money problems |
| <input type="checkbox"/> Problems telling time | <input type="checkbox"/> Problems with multi-steps |
| <input type="checkbox"/> Problems with story problems | <input type="checkbox"/> Other _____ |

Written Language

- | | |
|---|---|
| <input type="checkbox"/> Awkward pencil grasp | <input type="checkbox"/> Poor organization (ideas do not flow together, no transitions) |
| <input type="checkbox"/> Slow writing speed | <input type="checkbox"/> Incomplete sentences |
| <input type="checkbox"/> Sloppy handwriting | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Spelling problems | |
| <input type="checkbox"/> Poor mechanics | |

Visual-Spatial/Physical Abilities

- | | |
|--|---|
| <input type="checkbox"/> Problems with arts and crafts | <input type="checkbox"/> Falls down often |
| <input type="checkbox"/> Problems copying from board | <input type="checkbox"/> Trouble reading maps |
| <input type="checkbox"/> Difficulty using scissors | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Trouble using stairs | |

Other

- | | |
|--|--|
| <input type="checkbox"/> Homework not completed | <input type="checkbox"/> Frequent changes in schools |
| <input type="checkbox"/> Assignments not done in class | <input type="checkbox"/> Problems with transitions |
| <input type="checkbox"/> Comes unprepared to class | <input type="checkbox"/> Frequent absences |
| <input type="checkbox"/> Desk disorganized | <input type="checkbox"/> Tardiness |

Behavioral Concerns

Attention

- ☐ Daydreams
- ☐ Short attention span
- ☐ Easily distracted
- ☐ Often off-task
- ☐ Hyperfocuses (can't switch)
- ☐ Other _____

Impulsivity/Hyperactivity

- ☐ Squirms in seat
- ☐ Taps foot, pencil
- ☐ Blurts out answers
- ☐ Rushes through work
- ☐ Makes careless mistakes
- ☐ Trouble keeping hands, feet, objects to self
- ☐ Makes inappropriate comments
- ☐ Often leaves seat
- ☐ Other _____

Inappropriate Social Interactions

- ☐ Few or no friends
- ☐ Disrespectful of others' things
- ☐ Bossy
- ☐ Feels picked on
- ☐ Trouble sharing
- ☐ Trouble keeping personal boundaries
- ☐ Difficulty following rules in games
- ☐ Tattles
- ☐ Withdrawn, shy
- ☐ Unable to work in small groups
- ☐ Provokes or agitates others
- ☐ Other _____

Aggressiveness

- ☐ Bullies other students
- ☐ Explosive temper
- ☐ Verbally aggressive
- ☐ Physically aggressive
- ☐ Rebellious if disciplined
- ☐ Other _____

Frequent Violations of School Rules

- ☐ Bus violations
- ☐ Lies
- ☐ Noncompliance with directives
- ☐ Shows off (brags, clowns, etc.)
- ☐ Steals
- ☐ Damages others' property
- ☐ Leaves room/school without permission
- ☐ Copies from others/cheats
- ☐ Frequent unexcused tardies/absences
- ☐ Inappropriate seat behavior
- ☐ Does not raise hand when appropriate
- ☐ Other _____

Inappropriate Emotional Behaviors

- ☐ Looks sad, rarely smiles
- ☐ Pessimistic attitude
- ☐ Easily upset, feelings hurt
- ☐ Worries excessively
- ☐ Lacks energy, motivation
- ☐ Temper tantrums
- ☐ Excessive whining or crying
- ☐ Explodes under stress
- ☐ Perfectionist
- ☐ Other _____