Adams-Wells Special Services

Review of Existing Evaluation Data and Evaluation Plan

**School District**: Click here to enter text. **Teacher of Record**: Click here to enter text.

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| Date of Review: | | | |
| Student’s Name: | | | |
| Date of Birth: | Age: | Grade: | School: |
| Current Eligibility | | |  |

**Please complete the following information electronically, then email (with attachments) to the school psychologist. Also, provide your availability for a meeting with the school psychologist to review the data.**

1. Information from parents (concerns and/or outside evaluation results).

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1. Classroom *academic* information (teacher narrative, reading level, math level, accommodations)

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1. Classroom *behavior* information (PBIS, behavior log entries/referrals, behavior plans)

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1. Medical information/504 plan

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1. Attach or provide the following information: grades, attendance, standardized scores (NWEA, IREADY, IREAD-3, ILEARN, COGAT), RTI/MTSS notes and data, and social developmental history (if available). Please place links to the files in the text box below or send as separate attachments.
2. Signatures:

School Psychologist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Ed. Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REED Decision**

The school psychologist has reviewed the information in the REED with the TOR. The following decision has been made:

Yes, proceed with a re-evaluation. We will evaluate for the following: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No, do NOT proceed with a re-evaluation.