

COURSE: \_\_\_\_\_

**STUDENT DATA PROFILE**  
**TEACHER REPORT IN PREPARATION FOR ARD MEETINGS**

|   |                       |
|---|-----------------------|
| <b>Student's Name:</b> _____                | <b>Grade:</b> _____   |
| <b>Teacher:</b> _____                       | <b>Subject:</b> _____ |
| <b>ARD DATE:</b> _____                      | <b>TIME:</b> _____    |
| <b>Please complete and return to:</b> _____ | <b>By:</b> _____      |

Student currently has a GOAL(S) and OBJECTIVE(S) for your class: ☐ YES ☐ NO

Student needs a GOAL for your class: ☐ YES ☐ NO

**Please complete the following:**

**1. Present Competencies:**      Current Ave: \_\_\_\_\_      Missing Assignments? \_\_\_\_\_  
Lexile Score: \_\_\_\_\_      Reading GE: \_\_\_\_\_

**Uses:**    ☐ Supplemental aids (describe): \_\_\_\_\_  
☐ Oral Administration      ☐ Extra Time      ☐ Inclusion Support      ☐ Other \_\_\_\_\_

| List Course-specific skills: Indicate "S" for Strength and "W" for Weakness |  |  |  |
|---|--|--|--|
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |

**Comments / Additional Skills:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. If the student is not making progress in your class, please list any academic concerns:**

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

**3. Please check behavior as it affects placement, program, or discipline in your class:**

|   |                               |  |
|---|-------------------------------|--|
| _____ Interacts appropriately with peers  | _____ Cooperative             | _____ Poor attendance                      |
| _____ Interacts appropriately with adults | _____ Completes tasks         | _____ Participates in class discussions    |
| _____ Adjusts easily to new situations    | _____ Off task behavior noted | _____ Answers "wh" questions appropriately |
| _____ Respects authority                  | _____ Easily frustrated       | _____ Sound production/stuttering problems |

**4. If the student's behavior is not satisfactory in your class, please identify areas of concern and strategies attempted in regards to the behavior:**

Concerns: \_\_\_\_\_  
Strategies: \_\_\_\_\_

COURSE: \_\_\_\_\_

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5. **Classroom Accommodations for this school year:** Please check the accommodations the student REQUIRES in order to be successful in your class. Indicate those that are NECESSARY to implement all of the time.

- |   |  |
|---|--|
| <input type="checkbox"/> Concrete reinforcers                         | <input type="checkbox"/> Graphic organizers                      |
| <input type="checkbox"/> Positive reinforcers                         | <input type="checkbox"/> Check for understanding                 |
| <input type="checkbox"/> Behavior intervention plan (BIP)             | <input type="checkbox"/> Reduced written tasks                   |
| <input type="checkbox"/> Reminders to stay on task                    | <input type="checkbox"/> Note-taking assistance                  |
| <input type="checkbox"/> Frequent breaks                              | <input type="checkbox"/> Shortened assignments                   |
| <input type="checkbox"/> Cooling off period                           | <input type="checkbox"/> Repeated review                         |
| <input type="checkbox"/> Minimal distractors                          | <input type="checkbox"/> Extended time assigned (SPECIFY): _____ |
| <input type="checkbox"/> Oral administration of tests                 | <input type="checkbox"/> Read aloud to self                      |
| <input type="checkbox"/> Modified tests/texts                         | <input type="checkbox"/> Redo failing assignments/tests          |
| <input type="checkbox"/> Short answer tests                           | <input type="checkbox"/> Calculator                              |
| <input type="checkbox"/> Small group for testing                      | <input type="checkbox"/> Other: _____                            |
| <input type="checkbox"/> Change pace of instruction (DESCRIBE): _____ |  |
| <input type="checkbox"/> Accessibility features (DESCRIBE): _____     |  |
| <input type="checkbox"/> Manipulatives (DESCRIBE): _____              |  |
| <input type="checkbox"/> Study aids (DESCRIBE): _____                 |  |

6. **Classroom accommodations for next school year:** Are any changes needed in accommodations for next school year?

If so, please list: \_\_\_\_\_

7. **Parent contact:** Have you contacted this parent: ☐ Yes ☐ No Reason: ☐ Academics ☐ Behavioral

8. **Recommendations for placement:** What recommendations would you make for this school year?

- ☐ Gen Ed classroom ☐ Gen Ed classroom with Accommodations and Inclusion / In-class support

Do you recommend changes for next year placement? If so, please list: \_\_\_\_\_

9. **State Assessment for your subject area?** \_\_\_\_\_

If applicable, how is the work/tests modified? \_\_\_\_\_

**Recommendation for current school year:**

- ☐ STAAR ☐ STAAR Online ☐ STAAR-Alt (must meet all criteria)

**WHAT accommodations are needed for state assessment this school year and WHY?** \_\_\_\_\_

10. **Transition information:**

- |   |  |
|---|--|
| <input type="checkbox"/> Keeps work area neat                     | <input type="checkbox"/> Turns in assignments on time                |
| <input type="checkbox"/> Has good social skills                   | <input type="checkbox"/> Completes assigned tasks                    |
| <input type="checkbox"/> Follows directions                       | <input type="checkbox"/> Completes work in a neat and orderly manner |
| <input type="checkbox"/> Is reliable                              | <input type="checkbox"/> Organizes time and materials                |
| <input type="checkbox"/> Is responsible                           | <input type="checkbox"/> Adapts to new situations                    |
| <input type="checkbox"/> Cares for materials                      | <input type="checkbox"/> Works with others                           |
| <input type="checkbox"/> Is on time for class                     | <input type="checkbox"/> Prefers to work alone                       |
| <input type="checkbox"/> Attends class regularly                  | <input type="checkbox"/> Responds well to authority                  |
| <input type="checkbox"/> Displays interest & enthusiasm for tasks | <input type="checkbox"/> Is honest in dealing with others            |

11. **Comments:**

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