

**Reading and Writing: STUDENT DATA PROFILE
TEACHER REPORT IN PREPARATION FOR ARD MEETINGS**

HS

Student's Name: _____	Grade: _____
Teacher: _____	Subject: _____
ARD DATE: _____	TIME: _____
Please complete and return to: _____	By: _____

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 _____

Reading and Writing skills: Indicate "S" for Strength and "W" for Weakness			
	Listens actively to interpret a message, asks clarifying questions, and responds appropriately		Understands new vocabulary and uses it when reading and writing
	Follows and gives oral instructions that include multiple action steps		Reads grade-level text with fluency and comprehension
	Uses print or digital resources to determine the meaning, pronunciation, and part of speech of words		Demonstrates knowledge of literary genres (realistic fiction, adventure stories, historical fiction, mysteries, humor, and myths)
			Writes legibly and uses appropriate capitalization and punctuation
	Adjusts fluency when reading grade-level text based on the reading purpose		Analyzes, makes inferences and draws conclusions about theme, genre, and author's purpose
	Self-selects text and reads independently for a sustained period of time		Summarizes, paraphrases, & synthesizes texts to make meaning and logical order
S	Describe: _____	W	Describe: _____

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: _____

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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:

