

Goodhue County Education District Cannon Falls, Goodhue, Kenyon-Wanamingo, Lake City, Red Wing, Zumbrota-Mazepa	PROBLEM SOLVING TEAM PROBLEM IDENTIFICATION SCREENING SUMMARY
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Student: _____ Form Completed Date: _____

CUMULATIVE FOLDER REVIEW

HEALTH INFORMATION π Vision Concern π Hearing Concern π ADHD π Asthma π Other Diagnosis: _____	PREVIOUS SCHOOLS/SERVICES π Pre-Referral Interventions – Dates: _____ π Title 1– Dates: _____ π SPED Eval / Services– Dates: _____ π Out of District– Dates: _____ π Retained– Dates: _____ π Home Schooled– Dates: _____ π Other																								
ATTENDANCE # Days Absent Last Year: _____ # Days Absent Current Year: _____ Other Concerns: _____	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="4" style="text-align: center; padding: 5px;">GRADES</td> </tr> <tr> <td style="width:15%;"></td> <td style="width:15%; text-align: center; padding: 5px;">ELEMENTARY:</td> <td style="width:15%;"></td> <td style="width:15%; text-align: center; padding: 5px;">SECONDARY:</td> </tr> <tr> <td></td> <td style="text-align: center; padding: 5px;">math</td> <td style="text-align: center; padding: 5px;">reading</td> <td style="text-align: center; padding: 5px;">writing</td> </tr> <tr> <td style="padding: 5px;">above</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="padding: 5px;">meets</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="padding: 5px;">below</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> GPA: _____ Credits Earned: _____ Other Concerns: _____	GRADES					ELEMENTARY:		SECONDARY:		math	reading	writing	above				meets				below			
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	ELEMENTARY:		SECONDARY:																						
	math	reading	writing																						
above																									
meets																									
below																									

INTERVIEW SUMMARY

	PARENT	STUDENT	TEACHER
DATE:			
TYPE OF INTERVIEW:			

π ATTACH COMPLETED INTERVIEW NOTES

CLASSROOM OBSERVATION

DATE:	BY:
TYPE: π Interval	π Latency
π Frequency	π Duration
	π Washington
	π Other: _____

π ATTACH COMPLETED OBSERVATION FORM(S)

TESTING RECORDS

π ATTACH COMPLETED WEB PORTAL STUDENT TEST DATA SUMMARY (Be certain that all available GOM, Aimsweb, STAR, MCA data are reported. Locate and add any missing data).
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PROBLEM IDENTIFICATION SUMMARY – C1
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Team Met to Review these Data on: _____	Prioritized Area of Concern: _____
Discrepancy Statement: _____	
List at least 2 sources of convergent data that support this discrepancy: _____	
π Baseline data are plotted on the attached graph	
Disposition: π Level 1 Grade Level Team	π Level 2: Consultation from Support Staff: _____
π Level 3: Problem Solving Team	π Level 4: Special Education
Team Members Names: _____	
Team Member Responsible for Follow-Up: _____	

