

Consent for Evaluation for Special Education Services

Name: [REDACTED] Birth Date: [REDACTED] Date: 12-2-11

School: [REDACTED] Grade: 1

Initial Evaluation

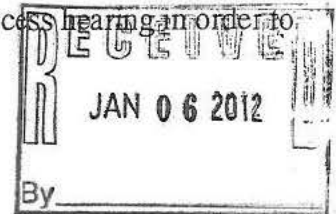
Re-evaluation

I, as a parent or guardian of the above named student, do do not give my consent for the evaluation of my child in order to determine if he/she is eligible for and in need of special education and/or speech services.

By giving consent I acknowledge that:

1. I have been fully informed of all information relevant to the proposed evaluation of my child as described in the Notice of Action form (attached).
2. I understand that my consent is voluntary and may be revoked at any time prior to the completion of the evaluation.
3. If I revoke consent, the revocation is not retroactive.
4. If I refuse to give consent, the district may request mediation or a due process hearing in order to override your refusal.

If you have any question please call [REDACTED] at [REDACTED].



I have received the following forms enclosed with this letter: (please check)

- Notice of Procedural Safeguards for Special Education Students and Their Families
 Notice of Action form.

[REDACTED]
Parent/guardian signature

1.3.12
Date

Parent/Guardian: Return signed consent form in the envelope provided

PRIOR WRITTEN NOTICE

Request to Evaluate

Dear [REDACTED]:

12/2/11

The purpose of this letter is to notify you of the district's action regarding [REDACTED] educational program, to obtain consent, and a developmental/health history. Please return the enclosed consent and health history in the envelope provided by 12/16/11.

1. Description of action by district (district representative selects one from each line and explains).

- | | | | | |
|--|--|------------------------------|------------------------------------|--|
| <input checked="" type="checkbox"/> Propose | <input type="checkbox"/> Refuse | | | |
| <input checked="" type="checkbox"/> Initiate | <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Referral | <input checked="" type="checkbox"/> Evaluation | <input type="checkbox"/> IEP | <input type="checkbox"/> Placement | <input type="checkbox"/> Re-evaluation |

Explanation: Further evaluation to determine special education eligibility.

2. Reason for action: We reviewed the Referral information and concluded that [REDACTED] is in need of further evaluation to determine eligibility for special education and/or related services.

3. Description of evaluation procedure, test, record or report used in taking this action: If you agree with our decision to evaluate, please sign and return the Consent Form in the envelope provided. We will conduct an evaluation within 35 school days from the date your Consent Form is received.

4. Description of other options considered, if any, and reason for rejecting them: We considered not evaluating but felt that further information was necessary to determine if special needs exists.

5. Other factors which are relevant to the proposal: None

A full explanation of your procedural safeguards has been attached. If you have any questions regarding your rights or this notice, please contact me at [REDACTED]. Mediation services are available to parents as a dispute resolution process.

[REDACTED], Special Programs Representative

PRIOR WRITTEN NOTICE

Notice of Referral

Dear [REDACTED]:

12/2/11

The purpose of this letter is to notify you of the district's action regarding [REDACTED] educational program.

1. Description of action by district (district representative selects one from each line and explains).

- | | | | |
|--|---------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> Propose | <input type="checkbox"/> Refuse | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Re-evaluation |
| <input checked="" type="checkbox"/> Initiate | <input type="checkbox"/> Change | <input type="checkbox"/> IEP | |
| <input checked="" type="checkbox"/> Referral | <input type="checkbox"/> Accept | <input type="checkbox"/> Placement | |

Explanation: [REDACTED] has been referred for possible evaluation to determine eligibility for special education services.

2. Reason for action: The attached Referral explains the reasons for consideration.
3. Description of evaluation procedure, test, record or report used in taking this action: We are currently in the process of reviewing the referral information including information provided by parents/guardians to decide if further assessment is needed. We will know within the next 25 school days and you will be notified accordingly.
4. Description of other options considered, if any, and reason for rejecting them: None
5. Other factors which are relevant to the proposal: If more testing is needed, we will need your permission at that time.

A full explanation of your procedural safeguards has been attached. If you have any questions regarding your rights or this notice, please contact me at [REDACTED]. Mediation services are available to parents as a dispute resolution process.

[REDACTED], School Representative

Encl.

Evaluation Team Meeting

Initial Evaluation Reevaluation IEP Team Meeting

Student: [redacted] Birth date: 1/1/
School: [redacted] Grade: 1
Date of Meeting: 11/17/11

Reason for Evaluation Team Meeting:

Accept/Decline Evaluation Eligibility Determination
Parent Concern Initial/Reevaluation Components to Assess
Teacher Concern IEP/Placement/Update

Notes:

The student is performing below grade level in :

- Reading, On-task skills, Study Skills, Motor, Language, Written Language, Social/Emotional, Behavior, Social, Articulation, Math, Adaptive/Self-help, Cognitive, Voice, Academics, Vocational, Prevocational, Fluency

The student has receive support interventions for a significant length of time.

Determination/Conclusion

The team decided to: make a referral for initial evaluation accept the referral
conduct a review conduct a re-evaluation.

Review Areas:

- Reading, Study Skills, Motor, Language, Prevocational, Written Language, Social/Emotional, Behavior, Articulation, Communication/Social, Math, Adaptive, Cognitive, Fluency, Academics, Self-Help, Vocational, Voice

Evaluation Areas:

- Reading, Study Skills, Motor, Language, Prevocational, Written Language, Social/Emotional, Behavior, Articulation, Communication/Social, Math, Adaptive, Cognitive, Fluency, Academics, Self-Help, Vocational, Voice

Evaluation Team Signatures

Name Position Date
Mom 11/17/11
Teacher 11/17/11
School Psychologist 11/17/11



PURPOSE: Districts are required to provide the parent with prior written notice describing any proposed evaluation procedures after they have determined through a review of existing data that additional assessments are required (WAC 392-172A-03020 and -03025). Districts may either: (1) describe the proposed assessments within the prior written notice form, or (2) use an assessment plan such as this one to describe the proposed assessments and include it with the prior written notice. If this form is used, the district must still complete the other required portions of the prior written notice and request consent for evaluation from the parent.

Assessment Plan

To: Parents of [Redacted]
(Parent/student/guardian)

Date: 11/17/16

Re: Student's Name: [Redacted]

DOB: _____

Reason for Assessment: Initial Evaluation Reevaluation Other: _____

The following assessments are proposed to assist in determining your child's initial or continuing educational needs. All assessments will be given by appropriately qualified personnel. The assessment(s) will be in the areas checked below and may also include: student observation in a group setting, classroom work samples, district or statewide group assessments, individualized testing, teacher interview(s), and/or an interview with you. It will include a review of reports you have authorized us to request or that already exist in current records. Assessments will be non-discriminatory, and alternative means of assessment may be used in situations when standardized assessments are inappropriate. After the evaluation is complete, you will be invited to attend a meeting to review assessment results and participate in determining your child's educational needs and eligibility for special education services.

PRE-ACADEMIC/ACADEMIC ACHIEVEMENT: Special Education Teacher School Psychologist Other: _____

Purpose: To determine the student's current reading, writing, and math skills, or pre-academic skills such as matching or sorting.

SOCIAL/EMOTIONAL BEHAVIOR: School Psychologist Infant/Preschool Specialist Other: _____

Purpose: To evaluate how the student handles feelings and emotions and how he/she gets along with other people.

SELF HELP/ADAPTIVE SKILLS: School Psychologist Other: _____

Purpose: To evaluate how the student functions in daily life activities.

PSYCHO-MOTOR DEVELOPMENT: School Psychologist Infant/Preschool Specialist Other: _____

Purpose: To determine how well the student coordinates body movements in both small and large muscle activities or to evaluate visual perceptual skills.

LANGUAGE/SPEECH/COMMUNICATION: Speech-Language Pathologist Infant/Preschool Specialist

Other: _____

Purpose: To determine the student's ability to understand, relate to, and use language and speech clearly and appropriately.

INTELLECTUAL DEVELOPMENT: School Psychologist Preschool Specialist Other: _____

Purpose: To determine the student's ability to remember what he/she has seen and heard, how well he/she can use that information to solve problems, and to assist in predicting the student's learning rate. Verbal and performance instruments may be used.

HEALTH ASSESSMENT: School Nurse Preschool Specialist Other: _____

Purpose: To evaluate the student's development patterns and current health status as they relate to school functioning.

VOCATIONAL/PREVOCAIONAL: Special Education Teacher School Psychologist Other: _____

Purpose: To determine the student's interests and/or aptitudes as they relate to future job and life skill areas.

OTHER: _____

Responsible Personnel: _____

As a parent(s) of a child with a disability, or suspected of having a disability, you have protections under state and federal laws. If you have questions or need assistance in understanding these rights, please call the Special Programs Office at 360-383-2012.

Name

Special Programs Director
Position

Referral Request for Special Education Services

Student's Name: [REDACTED]

Gender: M F

School: [REDACTED]

Teacher: [REDACTED]

Grade: /

Parent/Guardian Primary Language: English Spanish

Interpreter needed: No Yes

Reason for referral:

A special education evaluation referral was made for the following reason:

Student is performing below grade level in:

- | | | | | |
|---|---|---|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> Reading | <input type="checkbox"/> On-task skills | <input type="checkbox"/> Study Skills | <input type="checkbox"/> Motor | <input type="checkbox"/> Language |
| <input type="checkbox"/> Written Language | <input type="checkbox"/> Behavior | <input type="checkbox"/> Communication/Social | <input type="checkbox"/> Articulation | |
| <input type="checkbox"/> Math | <input type="checkbox"/> Adaptive/Self-help | <input type="checkbox"/> Cognitive | <input type="checkbox"/> Voice | |
| <input checked="" type="checkbox"/> Academics | <input type="checkbox"/> Vocational | <input type="checkbox"/> Prevocational | <input type="checkbox"/> Fluency | |

Is there a need for a surrogate parent: No

Referred by: [REDACTED]

Position: Teacher

Date: 11/17/11

Special Programs Office: [REDACTED]

INVITATION TO ATTEND MEETING

Student Name:

School:

was invited on 11/15/11 to attend:

Referral and Accept/Decline Evaluation

Eligibility Determination

participated in the previous KCT.

School Psychologist

ELIGIBILITY STATEMENT/SIGNATURE PAGE

STUDENT: [REDACTED]

DATE: 3/1/12

Eligibility Statement:

- Meets eligibility criteria
- Continues to meet eligibility criteria
- Does not meet eligibility criteria
- Has a disability, does not need Specially Designed Instruction (SDI)
If over the next 3 years additional evidence indicates a need for SDI, the team can reconvene and re-evaluate.
- Needs accommodations only. Consider 504 plan.

Disability Category: Specific Learning Disability

Statement of agreement: I have participated as a group member in determining this student's educational needs and possible handicapping condition. I also understand that if I disagree with the conclusions and recommendations of the group, I may write a separate statement outlining my conclusions and differences.

SIGNATURES OF PARTICIPANTS

[REDACTED SIGNATURES]

POSITION

School Psychologist
Teacher
LST

SPECIAL EDUCATION ADMINISTRATOR: _____

EVALUATION REPORT

Student: [redacted] Age: 6 Birth date: [redacted] Grade: 1st

Parent/Guardian(s): [redacted] Surrogate Parent Needed: No

Street Address: [redacted] Phone: [redacted]

School: [redacted] Evaluation Date: 3/1/12

Re-evaluation

BACKGROUND INFORMATION:

Reasons for referral or presenting concerns such as relevant medical and developmental history, sensory loss, teacher recommendations, academic or preacademic history, current placement in general education, parent input, instructional history, grade retention, any previous interventions and other factors.

Reason for Referral: Teacher saw [redacted] demonstrating low academic performance.

Developmental History: [redacted] mother reported the following.

Labor: 16 hrs. Complications: gestational diabetes, high blood pressure.

[redacted] had pneumonia at 8 mo., and head injury.

AREAS OF EVALUATION:

Evaluation sufficiently comprehensive to identify all of the individual student's special education and any necessary related service needs. Shall be in all areas of suspected disability(ies), including, if appropriate, health, vision, hearing, social or emotional status, general intelligence, academic performance, communicative status, and motor abilities.

The Evaluation Team has determined that assessment should occur in the following areas:

- Academic (individual, normed test)
- Intellectual/cognitive
- Communications
- Motor

EVALUATION PROCEDURES:

Evaluations were conducted in accordance with procedures outlined in WAC 392-172-108. Those conducting the assessments were qualified, including areas of special concern, and were properly certified or licensed. Each instrument used was reliable and valid, and considered to be otherwise technically sound.

Other factors: Health, sensory, physical, motor, and behavioral conditions, as well as economic, cultural and environmental conditions were ruled out as causes of academic delay. See individual assessment reports for specific evaluation procedures and results.

EVALUATION RESULTS:

Strengths: ■ likes school, tries, and feels proud of his progress. ■ is a helpful and eager to please. He is very motivated to learn and works hard. ■ is kind and considerate to his classmates.

Academic:

Woodcock/Johnson Tests of Achievement III – WJIII :

Reading

Basic Reading Skills: Below Average

Word Identification: Low Average

Word Attack: Below Average

Reading Comprehension: Below Average

Written Expression: Well Below Average

Writing Samples: Below Low Average

Writing Fluency: Well Below Average

Math

Math Calculation Skills: Low Average

Math Calculation: Low Average

Math Fluency: Low Average

Math Reasoning: Average

Woodcock/Johnson Tests of Achievement III - WJIII

Percentile: a value on a scale of one hundred that indicates the percent of a distribution that a student scored equal to or below other students. 25-75 = average range, 9-24 = low average, ≤ 8 = below average

Standard Score: 90-109 = average range, 80-89 = low average, ≤79 = below average

CLUSTER/Test	Raw	AE	EASY to DIFF			RPI	PR	SS(68% BAND)	GE
BASIC READING SKILLS	-	5-10	5-7	5-7	6-1	5/90	5	76 (72-80)	K.5
READING COMP	-	5-8	5-4	5-4	6-0	14/90	4	75 (70-79)	<K.7
MATH CALC SKILLS	-	6-2	5-8	5-8	6-10	74/90	21	88 (83-93)	K.9
MATH REASONING	-	6-3	5-8	5-8	6-9	72/90	26	90 (87-94)	1.0
WRITTEN EXPRESSION	-	5-7	5-3	5-3	6-1	44/90	2	69 (55-82)	K.2

Form A of the following achievement tests was administered:

Letter-Word Identification	14	5-11	5-8	5-8	6-2	6/90	10	81 (78-84)	K.6
Calculation	4	6-3	5-11	5-11	6-7	62/90	22	88 (82-94)	1.0
Math Fluency	6	5-10	<5-0	<5-0	7-9	84/90	14	84 (77-91)	K.5
Spelling	11	5-8	5-3	5-3	6-0	15/90	10	81 (76-85)	K.3
Writing Fluency	0	<5-6	<5-0	<5-0	<6-5	-	-	-	<K.0
Passage Comprehension	5	5-6	5-3	5-3	5-10	4/90	4	74 (68-79)	K.4
Applied Problems	20	6-2	5-8	5-8	6-9	71/90	31	93 (89-97)	1.0
Writing Samples	2-A	5-8	5-5	5-5	6-0	28/90	2	70 (60-80)	K.2
Word Attack	2	5-9	5-6	5-6	5-11	4/90	4	73 (66-80)	K.3
Reading Vocabulary	-	<5-11	<5-6	<5-6	<6-4	-	-	-	<K.7
Quantitative Concepts	-	6-3	5-8	5-8	6-9	73/90	27	91 (86-95)	1.0

Assessment Observations: ■ was cooperative and relatively quiet. A few times he squinted when looking at the testing material.

District Assessments

Reading: ■ is beginning to learn to blend sounds to read words. He reads at a level 2 with 89% accuracy according to the Developmental Reading Assessment (DRA). The expected level for 1st graders at this time of year is between levels 8-12. ■ can read 8 out of 40 words from the first grade essential word list. He says 12 sounds at a rate of 52/1 sounds per minute. According to the DIBELS Next reading assessment, ■ scored in the 28th percentile, which puts him in the intensive range.

Writing: ■ scored as an emerging writer according to a recent district writing assessment. He writes familiar words such as mom, dad, I, in and uses pre-phonetic spelling for other words (house =hs). With support during writing, ■ will add details to his pictures to tell more about his stories, he will write beginning and ending sounds, and is working on spacing between words.

Math: ■ can count to 59 (with some prompts), identifies numbers to 100 (except 13 which he calls 30), and counts accurately with 1:1 correspondence to 42 (but can count to 97 with prompts). At this time ■ is able to work on grade level math concepts with support (prompting, explaining, encouraging) in the regular classroom. He may need a separate math goal in the future as concepts become more difficult.

Academic History: ■ has received intensive instruction since kindergarten and has not responded well enough to the interventions.

Cognitive:

Stanford-Binet Intelligence Scales, Fifth Edition

earned a Full Scale IQ score of 87 on the Stanford-Binet Intelligence Scales, Fifth Edition. His current overall intelligence is classified as Low Average and is ranked at the 19th percentile. There is a 95 percent probability that his 'true' FSIQ is included in the range of scores between 83 and 91.

IQ Scores	Standard Score	Percentile	95% Confidence Interval		Descriptive Classification
			Score Range	Percentile	
Full Scale IQ (FSIQ)	87	19	83-91	13-27	Low Average
Nonverbal IQ (NVIQ)	93	32	87-99	19-47	Average
Verbal IQ (VIQ)	82	12	77-89	6-23	Low Average
Abbreviated IQ (ABIQ)	100	50	92-108	30-70	Average
<u>Factor Index Scores</u>					
Fluid Reasoning (FR)	85	16	79-95	8-37	Low Average
Knowledge (KN)	100	50	92-108	30-70	Average
Quantitative Reasoning (QR)	83	13	76-92	5-30	Low Average
Visual Spatial (VS)	85	16	78-94	7-34	Low Average
Working Memory (WM)	91	27	84-100	14-50	Average

When considering performance on the Full Scale IQ (FSIQ), his Nonverbal IQ of 93 is significantly greater than his Verbal IQ score.

Assessment Observations: initially had difficulty understand how to recognize patterns and problem-solved out loud. Eventually he learned the directions and task on his own. Talking out loud may be a useful strategy for him. In the fluid reasoning subtest with the chip groups, he did not seem to know the concept of "same" or "alike".

Observation: Behaviors matched classroom/school expectations. usually listens, follows directions, and is cooperative with people.

OTHER INFORMATION:

Health: Evaluation of current health needs did not indicate any medical or physical concerns that may be impeding academic progress. Vision and hearing screening indicate normal functioning.

CONCLUSION:

1) The disability category is **Specific Learning Disability**.

A severe discrepancy between intellectual functioning and academic achievement was found. Based on a Full Scale IQ score = 87, an achievement score (Standard Score) equal to or less than 69 indicates a severe discrepancy is present.

2) The disability has an adverse effect on the student's academic performance.

3) The need for special education (and related services) was determined by the evaluation team.

RECOMMENDATIONS:

Specialty Designed Instruction (SDI):

SDI is a unique instructional service for a student with a disability to accomplish Individual Education Plan (IEP) goals and objectives. These services include alterations, modifications, and adaptations in content, instructional methods, materials, techniques, media, physical setting, or environment.

The evaluation team determined specialty designed instruction would best meet learning needs in the areas of:

- Academics
- Reading
- Writing
- Math
- Communication
- Motor
- Social/ Emotional
- Study Skills
- Self-help
- Behavior

Academic:

Reading: Provide specialty-designed instruction in sound/symbol identification and sound/symbol fluency.

Writing: Provide specialty-designed instruction in writing beginning and ending sounds, and sentences about a topic using phonetic spelling and high frequency words.

Instruction: It is recommended that instruction be given in a small group setting and presented at instructional level. Direct Instruction techniques, sequential steps, prompts, models, and opportunities for practice are suggested for development of skills.

ACCOMMODATIONS, MODIFICATIONS, AND ASSISTIVE TECHNOLOGY

Subject (codes below)	Accommodations/Modifications Needed	Subject (codes below)	Accommodations/Modifications Needed
Presentation		Setting	
	Use large print/Braille/recorded books	a	Provide individualized/small group instruction
	Alter format of materials (<i>highlight, type, spacing, color-code etc.</i>)	a	Read class materials orally
	Low-vision devices (<i>magnifiers, Closed Circuit TV, etc.</i>)		Provide study outlines/guides/graphic organizers
	Sign Language – ASL or SEE	a	Modify/repeat/model directions
a	Shortened assignments	a	Take test in separate location
	Preview test procedures	a	Preferential seating
	Limited multiple choice		Other:
a	Rephrase test questions and/or directions	Response	
	Provide test/quiz study guide		Utilize oral responses to assignments/tests
	Provide extra credit options		Text-to-Speech (<i>Kurzweil, WYNN, Text Help, etc.</i>)
a	Simplify test wording	a	Allow dictation to a scribe
a	Read class materials orally		Allow use of a calculator
a	Assign peer tutor/note taker		Allow use of tape recorder
	Other:		Spelling and grammar devices
Timing/Scheduling			Speech-to-text software
	Prior notice of tests/quizzes		Hands-on assignments
a	Extra time to complete assignments		Other:
	Modify student's schedule (<i>describe below</i>):	Other	
			Provide desktop list of tasks
			Provide homework lists
			Behavior plan/contract
a	Extra time on tests/quizzes		Provide daily assignment list
a	Allow breaks (<i>during work, between tasks, during testing, etc.</i>)		Modified grading
	Other:		Other:

Assistive Technology

Description:

a. All subjects	e. Math	i. Health	m. Vocational
b. Reading	f. Science	j. Economics	n. Lunch/Recess
c. English	g. Social Studies	k. Physical Education	o. Library
d. Spelling	h. History	l. Music/Art	

SCORE REPORT

Name: [REDACTED]
 Date of Birth: [REDACTED]
 Age: 6 years, 10 months
 Sex: Male
 Date of Testing: 02/02/2012

School: [REDACTED]
 Teacher: [REDACTED]
 Grade: 1.5
 Examiner: [REDACTED]

TABLE OF SCORES
Woodcock-Johnson III Tests of Achievement
 Compuscore for the WJ III, Version 2.0
 Norms based on age 6-10

CLUSTER/Test	Raw	AE	EASY to DIFF		RPI	PR	SS(68% BAND)	GE
BROAD MATH	-	6-2	5-8	6-9	73/90	24	89 (86-93)	K.9
BROAD WRITTEN LANG	-	5-8	5-3	6-0	32/90	3	72 (64-79)	K.3
★ BASIC READING SKILLS	-	5-10	5-7	6-1	5/90	5	76 (72-80)	K.5
★ READING COMP	-	5-8	5-4	6-0	14/90	4	75 (70-79)	<K.7
MATH CALC SKILLS	-	6-2	5-8	6-10	74/90	21	88 (83-93)	K.9
MATH REASONING	-	6-3	5-8	6-9	72/90	26	90 (87-94)	1.0
★ WRITTEN EXPRESSION	-	5-7	5-3	6-1	44/90	2	69 (55-82)	K.2
ACADEMIC SKILLS	-	5-11	5-8	6-3	21/90	8	79 (76-82)	K.6
ACADEMIC APPS	-	5-9	5-5	6-1	25/90	6	77 (73-81)	K.5

Form A of the following achievement tests was administered:

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Calculation	4	6-3	5-11	6-7	62/90	22	88 (82-94)	1.0
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★ Writing Fluency	0	<5-6	<5-0	<6-5	-	-	-	<K.0
★ Passage Comprehension	5	5-6	5-3	5-10	4/90	4	74 (68-79)	K.4
Applied Problems	20	6-2	5-8	6-9	71/90	31	93 (89-97)	1.0
★ Writing Samples	2-2	5-8	5-5	6-0	28/90	2	70 (60-80)	K.2
★ Word Attack	2	5-9	5-6	5-11	4/90	4	73 (66-80)	K.3
★ Reading Vocabulary	-	<5-11	<5-6	<6-4	-	-	-	<K.7
Quantitative Concepts	-	6-3	5-8	6-9	73/90	27	91 (86-95)	1.0

ACADEMIC REPORT

Student: [REDACTED] Age: 6 Birth date: [REDACTED] Grade: 1st

School: [REDACTED] Evaluation Date: 3/1/12

ASSESSMENT RESULTS:

Woodcock/Johnson Tests of Achievement III – WJIII :

Reading

Basic Reading Skills: Below Average
 Word Identification: Low Average
 Word Attack: Below Average
 Reading Comprehension: Below Average

Written Expression:

Well Below Average
 Writing Samples: Below Low Average
 Writing Fluency: Well Below Average

Math

Math Calculation Skills: Low Average
 Math Calculation: Low Average
 Math Fluency: Low Average
 Math Reasoning: Average

Woodcock/Johnson Tests of Achievement III - WJIII

*Percentile: a value on a scale of one hundred that indicates the percent of a distribution that a student scored equal to or below other student:
 25-75 = average range, 9-24 = low average, ≤ 8 = below average*

Standard Score: 90-109 = average range, 80-89 = low average, ≤ 79 = below average

<u>CLUSTER/Test</u>	<u>Raw</u>	<u>AE</u>	<u>EASY to DIFF</u>		<u>RPI</u>	<u>PR</u>	<u>SS(68% BAND)</u>	<u>GE</u>
BASIC READING SKILLS	-	5-10	5-7	6-1	5/90	5	76 (72-80)	K.5
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WRITTEN EXPRESSION	-	5-7	5-3	6-1	44/90	2	69 (55-82)	K.2

Form A of the following achievement tests was administered:

Letter-Word Identification	14	5-11	5-8	6-2	6/90	10	81 (78-84)	K.6
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Writing Fluency	0	<5-6	<5-0	<6-5	-	-	-	<K.0
Passage Comprehension	5	5-6	5-3	5-10	4/90	4	74 (68-79)	K.4
Applied Problems	20	6-2	5-8	6-9	71/90	31	93 (89-97)	1.0
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Word Attack	2	5-9	5-6	5-11	4/90	4	73 (66-80)	K.3
Reading Vocabulary	-	<5-11	<5-6	<6-4	-	-	-	<K.7
Quantitative Concepts	-	6-3	5-8	6-9	73/90	27	91 (86-95)	1.0

Assessment Observations: [REDACTED] was cooperative and relatively quiet. A few times he squinted when looking at the testing material.

District Assessments

Reading: ■ is beginning to learn to blend sounds to read words. He reads at a level 2 with 89% accuracy according to the Developmental Reading Assessment (DRA). The expected level for 1st graders at this time of year is between levels 8-12. ■ can read 8 out of 40 words from the first grade essential word list. He says 12 sounds at a rate of 52/1 sounds per minute. According to the DIBELS Next reading assessment, ■ scored in the 28th percentile, which puts him in the intensive range.

Writing: ■ scored as an emerging writer according to a recent district writing assessment. He writes familiar words such as mom, dad, I, in and uses pre-phonetic spelling for other words (house =hs). With support during writing, ■ will add details to his pictures to tell more about his stories, he will write beginning and ending sounds, and is working on spacing between words.

Math: ■ can count to 59 (with some prompts), identifies numbers to 100 (except 13 which he calls 30), and counts accurately with 1:1 correspondence to 42 (but can count to 97 with prompts). At this time ■ is able to work on grade level math concepts with support (prompting, explaining, encouraging) in the regular classroom. He may need a separate math goal in the future as concepts become more difficult.

INTERPRETATIONS/EDUCATIONAL IMPLICATIONS:

Results indicate that ■ would benefit from intensive instruction through general education or special education.

School Psychologist
■ School District

Stanford-Binet Intelligence Scales, Fifth Edition Narrative Report

Confidential Report for

[REDACTED]

Examinee: [REDACTED]
Date of Birth: [REDACTED]
Date of Testing: [REDACTED]
Age: 6 years 10 months
Sex: Male

Examiner: [REDACTED]
Date of Report: 2/29/2012
School/Agency: [REDACTED]
Grade/Occupation: 1st Grade
ID:

Tests Administered

Stanford-Binet Intelligence Scales, Fifth Edition (SB5): Full Scale Battery

Test Results

[REDACTED] earned a Full Scale IQ score of 87 on the Stanford-Binet Intelligence Scales, Fifth Edition. His current overall intelligence is classified as Low Average and is ranked at the 19th percentile. There is a 95 percent probability that his 'true' FSIQ is included in the range of scores between 83 and 91.

	Standard Score	Percentile	95% Confidence Interval		Descriptive Classification
			Score Range	Percentile	
<u>IQ Scores</u>					
Full Scale IQ (FSIQ)	87	19	83-91	13-27	Low Average
Nonverbal IQ (NVIQ)	93	32	87-99	19-47	Average
Verbal IQ (VIQ)	82	12	77-89	6-23	Low Average
Abbreviated IQ (ABIQ)	100	50	92-108	30-70	Average
<u>Factor Index Scores</u>					
Fluid Reasoning (FR)	85	16	79-95	8-37	Low Average
Knowledge (KN)	100	50	92-108	30-70	Average
Quantitative Reasoning (QR)	83	13	76-92	5-30	Low Average
Visual Spatial (VS)	85	16	78-94	7-34	Low Average
Working Memory (WM)	91	27	84-100	14-50	Average

NOTE: An asterisk (*) indicates that the score has been calculated based on prorated test score information.

When considering [REDACTED] performance on the Full Scale IQ (FSIQ), his Nonverbal IQ of 93 is significantly greater than his Verbal IQ score.

The 'true' Nonverbal IQ is expected to lie within a range of scores between 87 to 99 with 95 percent confidence. [REDACTED] nonverbal reasoning skills are classified as Average and are ranked at the 32nd percentile. His 'true' Verbal IQ of 82 is expected to lie within a range of scores between 77 to 89 with 95 percent confidence. [REDACTED] current verbal reasoning abilities are classified as Low Average and are ranked at the 12th percentile.

Knowledge was identified as the highest Factor Index score in [REDACTED] profile.

Knowledge represents an examinee's accumulated fund of general information acquired at home, school or work. In research, this factor has been called crystallized ability.

This score represents an area of relative strength for [REDACTED]. He may find tasks requiring this ability easier and such strengths may suggest a preferred learning style. Compared to other individuals this

score would be described as Average.

Similarly, Quantitative Reasoning represents [REDACTED] poorest area of performance.

Quantitative Reasoning is an examinee's facility with numbers and numerical problem solving.

[REDACTED] will likely find tasks that measure this ability to be more challenging. Compared to other individuals, this score would be described as Low Average.

Information about SB5 Subtests

Subtest Scaled Scores

<u>Nonverbal Scores</u>			<u>Scores</u>		<u>Verbal</u>	
	Scaled	%ile		Scaled	%ile	
Fluid Reasoning		9	37	Fluid Reasoning	6	
9						
Knowledge	9	37	Knowledge	11	63	
Quantitative Reasoning	7	16	Quantitative Reasoning	7	16	
Visual Spatial	7	16	Visual Spatial	8	25	
Working Memory	13	84	Working Memory	4	2	

NOTE: NA means that insufficient information was available to calculate the score for this individual.

- Nonverbal Working Memory was found to be significantly and practically higher than the average of the 10 FSIQ subtests. This may show that [REDACTED] has a relative strength in retaining and sorting through visual information held in short-term memory.
- Verbal Working Memory was found to be significantly and practically lower than the average of the 10 FSIQ subtests. This may show that [REDACTED] is relatively less proficient in recalling sentences or portions of information presented orally.

Summary

The testing session was deemed appropriately valid for obtaining an accurate representation of [REDACTED] current level of intellectual functioning. The current overall level is classified as Low Average and is ranked at the 19th percentile. [REDACTED] showed a differentiated profile of factor indexes and subtest scores.

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PURPOSE: The individual documentation of assessment results form describes the procedures and instruments used in assessment of the student the results obtained, any conclusions from observations of the student, and a statement of the apparent significance of the findings related to the student's suspected disability(ies) and instructional program. Each professional member of the evaluation group who contributed to the evaluation report is required to document the results of his/her individual assessment. This individual documentation may be a separate document or members may wish to incorporate the individual documentation elements in the evaluation report.

INDIVIDUAL DOCUMENTATION OF ASSESSMENT RESULTS

Student name: [Redacted] School: [Redacted]
Date of Birth: [Redacted] Age: [Redacted] Grade: 1
Examiner: [Redacted] Evaluation Date: 3/1/12
Area of Assessment Vision Hearing Medical Update

Procedures and Instruments Used in Assessment and the Results Obtained:

- Review of School Records
- Review of New Medical Documentation
- Vision Screening (Snellen Letter Chart)
- Hearing Screening (audiometer)
- Parent Health History
- Other: _____

Conclusions (Statement of the apparent Significance of the Findings as Related to the Suspected Disability(ies) and Instructional Program):

- Medical history and screening information provided no evidence of significant health factors that could adversely impact this student's academic progression.
- This student has the following hearing vision health issue(s) that may have a direct impact upon academic performance: _____

Hearing screening results:

- Within normal limits (WNL) bilaterally at 20 decibels across the following frequencies:
 500 1000 2000 3000 4000 8000
- WNL in the left right ear at 20 decibels across the following frequencies:
 500 1000 2000 3000 4000 8000
- Did not pass in the left right ear at 20 decibels across the following frequencies:
 500 1000 2000 3000 4000 8000
- Did not pass in the left right ear at 20 decibels across the following frequencies:
 500 1000 2000 3000 4000 8000

- This student wears a hearing aid

Vision screening results:

- WNL in both the left and right eye: Results – Left eye: 20/30 Right Eye: 20/30 11/12
- Did not pass the vision screening in the Left eye: _____ Right Eye: _____
- Vision concerns may warrant the need for glasses. A vision referral will be sent home.

A vision hearing screening could not be completed due to the following:

- Refusal to complete
- The nature of the task was too difficult for the student to attend to the eye chart/audiometer
- Other: _____

- This student wears glasses.
- Sensory issues may impact learning and may warrant specific accommodations.
- Comments: _____

[Redacted Signature]

School Psychologist
Position

3/1/12
Date

K - vision & hearing normal

School District Health History

This questionnaire is designed to aid school staff in anticipating any health concerns that might affect your child's learning

Student's Name [Redacted]
 Grade: K First Middle Last
 Sex: M Date of Birth: [Redacted]

MEDICAL

Does your child have a doctor or nurse practitioner? Yes No
 Name of child's doctor or nurse practitioner [Redacted] phone number [Redacted]
 In the past 12 months, did you have problems obtaining medical care for your child? Yes No

DENTAL

Does your child have a dentist? Yes No Name of child's dentist [Redacted] phone number [Redacted]
 Did your child receive a dental exam in the last 12 months? Yes No Don't know
 Describe the condition of your child's teeth? Good Fair Poor Don't know
 In the past 12 months, did you have problems obtaining dental care for your child? Yes No

INSURANCE

Does your child have medical insurance coverage? Yes No Don't know Name of provider [Redacted]
 Does your child have dental insurance coverage? Yes No Don't know Name of provider [Redacted]
 Does Medicaid insure him/her? (Healthy Options, DSHS, "medical coupon") Yes No Don't know

MEDICAL HISTORY

Have you ever been told by a physician or health care professional that your child has:
 Asthma Seizure disorder Bleeding disorder ADD/ADHD
 Diabetes Bone/muscle disease Skin condition Learning disability
 Heart condition Mental health condition (i.e. depression, anxiety, eating disorder) Other _____

Does your child experience any of the following?

Nose bleeds Frequent ear aches Overweight for age Physical disability
 Poor appetite Frequent stomach aches Frequent headaches Fainting spells
 Tires easily Emotional concerns Underweight for age Other _____

Do any of the above condition(s) limit/affect your child at school? NO

LIFE THREATENING CONDITIONS

Does your child have a life threatening health condition? Yes * No Describe: _____

[Redacted]

ALLERGIES

Plants Animals Food Molds Drugs Bees Other: _____
 Please describe the allergic reaction and the treatment allergic to penicillin broke out in hives

MEDICATION

Does your child take any medication? Yes No If yes, name of medication: albuterol
 Purpose: for asthma Will medication be needed at school Yes No

[Redacted]

HEARING/VISION

Do you have concerns about your child's hearing? Yes No Does your child wear hearing aides? Yes No
 Do you have concerns about your child's vision? Yes No Does your child wear glasses or contacts? Yes No

SPEECH/LANGUAGE

Do you have concerns about your child's speech and/or language? Yes No Do others have difficulty understanding your child?
 Yes No If so, please explain _____

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

I understand that the information given above will be shared with appropriate school staff on a need to know basis to provide for the health and safety of my child. If either I or an authorized emergency contact person cannot be reached at the time of a medical emergency, I authorize and direct school staff to send my child to the most easily accessible hospital or physician. I understand that I will assume full responsibility for payment of any transport or emergency medical services rendered.

Parent/Guardian Signature [Redacted] Date 4.22.10

NAME: _____

DATE: 3/1/12

STUDENT OBSERVATION

Behavior:

- Has trouble keeping place or following along in material
- Is unusually dependent on the teacher
- Weak listening skills
- Frequently requires redirection
- Rarely works to potential
- Produces adequately in 1 to 1 situations, but not in a group
- Lack of interest in work
- Doesn't ask for help
- Slow to finish work
- Difficulty focusing/ Frequently off-task
- Distracted by peripheral noise/movement
- Difficulty starting a task
- Physically active in the classroom
- Is disorganized and/or messy
- Does best in highly structured activities

Comments: _____

Disruptive behaviors:

- Defiant
- Seeks attention
- Suspected lying
- Noncompliant
- Impulsive
- Suspected stealing
- Temper tantrums
- Doesn't respond to rewards
- Talk-outs
- Not impacted by consequences
- Inappropriate body language

Comments: Distracts others physically

Emotional:

- Mood swings
- Evasive
- Fearful
- Low emotional expression
- Perfectionist / Rigid
- Withdrawn /alone
- Submissive
- Shows little remorse/regret
- Negative attitude
- Anxious
- Aggressive
- Appears depressed or sad
- Quarrelsome / argumentative
- Demanding
- Appears tired/exhausted

Comments: Takes time building trust.

Peer / Social:

- Frequent fights
- Tattles
- Bullies peers
- Makes hurtful comments
- Overly sensitive to feedback
- Sexually inappropriate
- Denies responsibilities
- Little communication with others

No Concerns

- Appropriate classroom behavior, completes assigned tasks in timely manner.

Summary (For School Psychologist)

Observation suggested that behaviors overall do do not match classroom/school expectations. Areas of concern that disrupt the learner's or learning environment are: "study skills", such as work completion, completing work on time, staying on task, working independently, and organizational skills; inappropriate classroom/school behavior, such as talk-outs, disruptive, oppositional/ defiant, and not following directions; and disrupted peer relations, marked by aggression, quarrelsome, lying, and temper outbursts in relation to peers.

Learning Support/ Special Ed. Teacher

School Psychologist