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| **STUDENT NAME: DATE OF MEETING:** |
| **DOCUMENTATION OF EVALUATION RESULTS** |
| Complete for initial evaluations, reevaluations, or a review of an independent or outside evaluation. |
| Considering all available evaluation data, record the team’s analyses of the student’s functioning levels. Only those areas which were identified as relevant to the current evaluation must be completed. All other areas should be noted as “Not Applicable”. Evaluation data may include: parental input, teacher recommendations, physical condition, social or cultural background, adaptive behavior, record reviews, interviews, observations, testing etc. Describe the observed strengths and/or deficits in the student’s functioning in the following domains. |
| Academic Achievement *(Current or past academic achievement data pertinent to current educational performance.)* |
| Functional Performance *(Current or past functional performance data pertinent to current functional performance.)* |
| Cognitive Functioning *(Data and other Information regarding intellectual ability; how the student takes in information, understands information, and expresses information.)* |
| Communicative Status *(Information regarding communicative abilities (language, articulation, voice, fluency) affecting educational performance.)* |
| For ELL students explain ELL STATUS: Has Linguistic status changed? Yes No |
| Health *(Current or past medical difficulties affecting educational performance.)* |
| Hearing/Vision *(Auditory/visual problems that would interfere with testing or educational performance. Include dates and results of last hearing/vision test.)* |
| Motor Abilities *(Fine and gross motor coordination difficulties, functional mobility, or strength and endurance issues affecting educational performance.)* |
| Social/Emotional Status/Social Functioning *(Information regarding how the environment affects educational performance--life history, adaptive behavior, independent functioning, personal and social responsibility, cultural background.)* |