

# Teacher Referral Form

Student:	Grade:
Teacher:	Date:
Course:	

Please be as specific and detailed as possible. This information will be used in assisting with the evaluation process. Please be sure that you are making your comparison of this student in reference to the other students in your classroom. Please return to your AZ FIND Coordinator by the requested date.

## Cognitive Domain:

### 1. Ability to follow directions:

Verbally:  Above Average  Average  Below Average

Written:  Above Average  Average  Below Average

2. Retains instructions or concepts:  Above Average  Average  Below Average

3. Problem Solving Skills:  Above Average  Average  Below Average

## Affective Domain

1. Interpersonal relationships with peers:  Above Average  Average  Below Average

2. Interpersonal relationships with adults:  Above Average  Average  Below Average

3. Level of self confidence:  High  Medium  Low

4. Temperament (i.e. works alone, personable, moody, needs close supervision, needs varied or repetitive work):

## Communication Domain

1. Expressive language skills:  Above Average  Average  Below Average

2. Receptive language skills:  Above Average  Average  Below Average

3. Articulation:  Above Average  Average  Below Average

## Classroom Observations

1. Indicate observations using the following scale: 1 = Below Average 2 = Average 3 = Above Average

- |  |   |
|--|---|
| <input type="checkbox"/> Attendance record                       | <input type="checkbox"/> Is punctual                    |
| <input type="checkbox"/> Tries to do his/her best                | <input type="checkbox"/> Follows directions (all types) |
| <input type="checkbox"/> Completes assignments                   | <input type="checkbox"/> General attitude               |
| <input type="checkbox"/> Physical stamina                        | <input type="checkbox"/> Coordination (fine/gross)      |
| <input type="checkbox"/> Has good grooming/hygiene               | <input type="checkbox"/> Has a positive attitude        |
| <input type="checkbox"/> Interpersonal relationships (peer)      | <input type="checkbox"/> Self-confidence                |
| <input type="checkbox"/> Organization (plans work)               | <input type="checkbox"/> Attention span/concentration   |
| <input type="checkbox"/> Interpersonal relationships (authority) |   |

2. Describe areas of potential social/emotional concern (if any):

3. Describe any known physical or medical limitations or conditions that may affect classroom or vocational performance:

4. Motivation/initiative: In the classroom:  Above Average  Average  Below Average

5. Outside the classroom:  Above Average  Average  Below Average

6. If attention span is a problem, how long can the student attend to a task?

7. Is sitting or standing a problem?  Yes  No

8. Does he/she have behavioral problems?  Yes  No  
If yes, please describe:

9. Does he/she have any peculiar mannerisms (i.e. rocking, shaking head, etc.)?  Yes  No  
If yes, please describe:

10. Are assignments turned in neatly completed?  Yes  No

**Please explain academic strengths. (EX: Can properly identify pronouns, verbs, etc. – include where the student is currently performing if possible)**

**Please explain academic weaknesses. (EX: Punctuation, conventions, reading comprehension, appropriate use of mathematical operations.) Include where the student is currently performing if possible.**

**What accommodations/interventions does the student regularly use in your classroom? (EX: extended time, word processor, timer to stay on task, daily assignment sheet, provided written outlines for notes)**

Current Grade:  
(Please make sure the grade is reflected in comments)

Number of absences:                      Number Tardies:

Please use the following checklist to assist in determining work readiness.

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Has good attendance pattern (90%)
<input type="checkbox"/>	<input type="checkbox"/>	Follows correct procedure for lateness/absentee
<input type="checkbox"/>	<input type="checkbox"/>	Has appropriate grooming and hygiene
<input type="checkbox"/>	<input type="checkbox"/>	Dresses appropriately for school/employment
<input type="checkbox"/>	<input type="checkbox"/>	Is punctual
<input type="checkbox"/>	<input type="checkbox"/>	Starts work independently
<input type="checkbox"/>	<input type="checkbox"/>	Can follow established work routine
<input type="checkbox"/>	<input type="checkbox"/>	Requests appropriate help when help is needed
<input type="checkbox"/>	<input type="checkbox"/>	Continues work regardless of distractions
<input type="checkbox"/>	<input type="checkbox"/>	Works in absence of supervision
<input type="checkbox"/>	<input type="checkbox"/>	Works consistently until work is completed
<input type="checkbox"/>	<input type="checkbox"/>	Completes tasks within specific time frame
<input type="checkbox"/>	<input type="checkbox"/>	Uses time wisely
<input type="checkbox"/>	<input type="checkbox"/>	Looks for and starts next task after initial task is completed
<input type="checkbox"/>	<input type="checkbox"/>	Is willing to try any task/assignment requested
<input type="checkbox"/>	<input type="checkbox"/>	Cooperates with others
<input type="checkbox"/>	<input type="checkbox"/>	Responds appropriately to supervision
<input type="checkbox"/>	<input type="checkbox"/>	Accepts corrective criticism and praise
<input type="checkbox"/>	<input type="checkbox"/>	Demonstrates appropriate interaction with peers/adults
<input type="checkbox"/>	<input type="checkbox"/>	Communicates needs and wants appropriately
<input type="checkbox"/>	<input type="checkbox"/>	Cares properly for classroom, supplies, and equipment
<input type="checkbox"/>	<input type="checkbox"/>	Cleans up work site when needed
<input type="checkbox"/>	<input type="checkbox"/>	Adjusts readily to new work situation
<input type="checkbox"/>	<input type="checkbox"/>	Is interested in further job training
<input type="checkbox"/>	<input type="checkbox"/>	Squints to see board or book
<input type="checkbox"/>	<input type="checkbox"/>	Asks for directions to be repeated often

\*The ADE does not require the use of this form. It is a sample best practice document to be used at the discretion of the PEA.