**Manzanita Elementary**

**Student Support Team (SST)**

**Request**

SST requested by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_

Parent(s)/Guardian(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip

Phone:(Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Work)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Request:** **□** Academic **□** Behavioral **□** Health

 *Use the Speech/Language Request for speech and/or language concerns.*

**Identify any areas in which the student displays a significant strength (S) or weakness (W). Attach dated work samples that illustrate the student’s weaknesses.**

|  |  |  |
| --- | --- | --- |
| **\_\_\_\_ Reading** | **\_\_\_\_ Math** | **\_\_\_\_Written Language** |
|  \_\_\_\_ Vocabulary |  \_\_\_\_ Number Sense & Numeration |  \_\_\_\_ Sentence Structure |
|  \_\_\_\_ Letter/Word Recognition |  \_\_\_\_ Geometry & Measurement |  \_\_\_\_ Vocabulary |
|  \_\_\_\_ Comprehension |  \_\_\_\_ Patterns & Relationships/Algebra |  \_\_\_\_ Organization |
|  \_\_\_\_ Phonics |  \_\_\_\_ Statistics & Probability |  \_\_\_\_ Spelling |
|  \_\_\_\_ Fluency |  \_\_\_\_ Computation & Estimation |  \_\_\_\_ Punctuation |
|  \_\_\_\_ Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_ Problem Solving \_\_\_\_ Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  \_\_\_\_ Grammar \_\_\_\_ Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Comments:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Identify areas in which the student displays significant difficulties or functions significantly below the expected level.**

|  |  |  |
| --- | --- | --- |
| **\_\_\_\_ Learning Behaviors** | **\_\_\_\_ Processing** | **\_\_\_\_ Social/Adaptive Skills** |
|  \_\_\_\_ Working in a group |  \_\_\_\_ Fine motor skills |  \_\_\_\_ Develops friendships |
|  \_\_\_\_ Working independently |  \_\_\_\_ Gross motor skills |  \_\_\_\_ Relates well to adults |
|  \_\_\_\_ Distractibility |  \_\_\_\_ Reversals/transpositions |  \_\_\_\_ Emotional outbursts |
|  \_\_\_\_ Impulsivity |  \_\_\_\_ Handwriting |  \_\_\_\_ Withdrawal |
|  \_\_\_\_ Energy level too high |  \_\_\_\_ Copying from board |  \_\_\_\_ Chronic lying |
|  \_\_\_\_ Energy level too low |  \_\_\_\_ Copying from book or paper |  \_\_\_\_ Chronic cheating |
|  \_\_\_\_ Frustration tolerance |  \_\_\_\_ Visual memory |  \_\_\_\_ Chronic absences/tardies |
|  \_\_\_\_ Organization |  \_\_\_\_ Right/left confusion |  \_\_\_\_ Stealing |
|  \_\_\_\_ Completing assignments |  \_\_\_\_ Auditory memory |  \_\_\_\_ Bullying |
|  |  \_\_\_\_ Sequencing |  \_\_\_\_ Socially immature |
|  |  |  \_\_\_\_ Immature language |
|  |  |  \_\_\_\_ Delayed self-help skills |

**Comments:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10/03 (over)**

**Interventions Attempted Prior to SST Request:**

|  |  |  |
| --- | --- | --- |
| **Intervention(s)** | **Date(s)** | **Outcome(s)** |
| Parent/Teacher/Student Conference |  |  |
| Parent Contact |  |  |
| Consultation with Co-Workers |  |  |
| Adjusted Workload |  |  |
| Alternative Teaching Methods |  |  |
| Modified Materials |  |  |
| Modified Presentations |  |  |
| Behavior Contract |  |  |
| After School Program |  |  |
| Other: |  |  |
|  |  |  |
|  |  |  |

**School and Social History** (*To be completed by teacher*)

1. List support services the student is receiving or has received in the past (e.g., speech, Tutoring, Title I, social worker, mental health, school counseling, foster placement, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Attendance for current school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Excused:\_\_\_\_\_\_\_ Unexcused:\_\_\_\_\_\_\_ Tardy: \_\_\_\_\_\_\_\_

3. Previous schools attended:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. School-wide Assessment Results (i.e., STAR, RIGBY, DIBELS, SRA, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Medical/physical problems:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Current medications:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Comments:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10/03**