

REFERRAL FORM
SPECIAL EDUCATION AND RELATED SERVICES
 Form R-1 (Rev. 7/06)

STEVENS POINT SCHOOL DISTRICT

Initial

Reevaluation

Name of child (Last, first, middle) Heather Jones		Date of birth 1-07-1995	Grade 2nd	School Lincoln School
Name of parent or legal guardian Christine Jones and Joseph Smith		Address (Street, city, state, zip) 1000 Howard Ave. Stevens Point, WI 54481		
Telephone area/no. (715) 555-8173	Person making referral/title Mrs. Haas (2nd Grade Teacher) and Christine Jones (Mother)		Date parent notified of intent to refer March 1, 2003	
Method of notifying parent of intent to refer <input checked="" type="checkbox"/> Conference <input checked="" type="checkbox"/> Phone call <input checked="" type="checkbox"/> Written			Is an interpreter needed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Parent's or adult student's native language or other primary mode of communication if other than English (specify):				
Child's native language or other primary mode of communication if other than English (specify):				

Date of receipt of referral by school district/LEA: April 7, 2003

(Note: the date the district receives the referral begins the 15 business day timeline in which to complete the review of existing information and notify the parents of whether additional assessments are needed.)

State reason you believe this child has a disability (impairment and a need for special education) - such as academic and non-academic performance and medical information; any special programs, services, interventions used to address this student's needs and the results of those interventions, etc.

Heather's mother and Mrs. Haas (her classroom teacher in grade two) referred Heather for an evaluation on March 1, 2003. Also, the Marshfield Clinic referred following a visit made in January 2003. Heather was evaluated by the clinic at the request of the mother for an evaluation because she displayed signs of a possible Attention Deficit Hyperactive Disorder and a learning disability.

If the child is transitioning from a Birth to 3 Early Intervention Program, and the district was invited by the designated lead agency to participate in the transition planning meeting, document the date of the meeting and who attended for the LEA or explain why the LEA did not attend:

N/A