

Request for Assistance Form (RAF)
 Questions in **BOLD** are required, others are optional.

Username	
Student Name	
Grade	
DOB	
Parent/Guardian Name *Please indicate relationship of adult to student	
Home Phone	
Home Address	
Date you contacted parent	
Method(s) used to contact parent	
Result of parent contact	
Have you discussed this concern with your grade level team or the student's homeroom teacher?	<input type="checkbox"/> YES <input type="checkbox"/> No
What interventions/strategies were implemented as a result of the grade level team meeting	
What have you used to document progress (academic/behavior)? Please attach or describe progress.	
How does this student respond when asked to do something	
Does this student get upset if you have to say "no" to a request? * please provide at least one example	
How does this student's behavior interfere with their own or others' educational performance? *please provide at least one example	
Who are his/her friends?	
Is this student successful at maintaining friendships?	
Areas of concern: * Check all that apply	<input type="checkbox"/> Academic (reading only) <input type="checkbox"/> Academic (math only) <input type="checkbox"/> Academic (multiple concerns/more than reading or math)

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	<input type="checkbox"/> Behavior <input type="checkbox"/> Speech/Language <input type="checkbox"/> Gross and/or Fine Motor <input type="checkbox"/> Handwriting <input type="checkbox"/> Health <input type="checkbox"/> Social Skills
What are the student's strengths, things they are good at, like, etc.?	
Select the description MOST true of this student's academic performance... (if you have a behavior concern, skip this question)	<input type="checkbox"/> This student's academic performance is inconsistent across settings <input type="checkbox"/> This student makes many error <input type="checkbox"/> The current academic demands are too hard for this student <input type="checkbox"/> This student's performance is only a problem in one or two settings <input type="checkbox"/> This student is not struggling academically
Check (up to) your top 3 behaviors of concern	<input type="checkbox"/> Talking out <input type="checkbox"/> Fidgeting <input type="checkbox"/> Out of seat <input type="checkbox"/> Pestering students <input type="checkbox"/> Not following directions/rules <input type="checkbox"/> Refusing to work <input type="checkbox"/> Daydreaming/staring <input type="checkbox"/> Arguing <input type="checkbox"/> Uncompleted classwork <input type="checkbox"/> Tardy/absent <input type="checkbox"/> Bus violations <input type="checkbox"/> Getting in fights with others <input type="checkbox"/> Bullying others <input type="checkbox"/> Uncompleted homework <input type="checkbox"/> Poor/failing grades on assignments/tests <input type="checkbox"/> Low performance on State wide/STAR assessments <input type="checkbox"/> Other:
Of the three problem behaviors/concerns, which is the most significant (behavior/concern #1)?	

How often does behavior/concern #1 occur (frequency)?	<input type="checkbox"/> 1-3 times per month <input type="checkbox"/> 1-6 times per week <input type="checkbox"/> 1-5 times per day <input type="checkbox"/> 6 or more times per day <input type="checkbox"/> 1 or more times per hour <input type="checkbox"/> Less than 25% of assignments/tests <input type="checkbox"/> 25-50% of assignments/tests <input type="checkbox"/> More than 50% of assignments/tests
In detail, please describe what behavior/concern #1 looks like	
How severe is behavior/concern #1?	<input type="checkbox"/> Slightly serious: low risk for being a danger to self/others/environment and/or low risk for not meeting academic expectations <input type="checkbox"/> Moderately serious <input type="checkbox"/> Very serious <input type="checkbox"/> Extremely serious: is currently a danger to self/others/environment and/or currently not meeting minimal academic growth expectations to advance to the next grade level
What seems to “cause” or “set off” behavior/concern #1 (Antecedent)?	
What happens right after behavior/concern #1 (Consequence)?	
What have you done in response (discipline/to correct the problem) that has worked or partially worked for dealing with behavior/concern #1?	
What have you done in response (discipline/to correct the problem) that has NOT worked at all for dealing with behavior/concern #1?	
When did you first see behavior/concern #1?	
Do you have any ideas as to why this student may be engaging in	

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behavior/concern #1?	
If you were to have an individual who wanted to observe behavior/concern #1 occurring, what time would you have them observe the student, OR what would you do to the student or the environment to elicit the behavior?	
If you were to have an individual observe the student and you did NOT want the behavior/concern #1 occurring, what time would you have them observe the student, OR what would you do to the student or the environment to make sure the behavior did not occur?	
Do you have any additional academic or behavior concerns you would like to address or discuss? If yes, please provide a description of your concerns here.	