



## Southern Worcester County Educational Collaborative

Post Office Box 517

Southbridge, Massachusetts 01550

Tel. (508) 764-8500 ~ Fax. (508) 764-2724

Visit us at: [www.swcec.org](http://www.swcec.org)

Administrative Offices  
Dudley, MA 0157

Julian (Bud) E. MacDonnell, Jr.,  
Executive Director

To Whom It May Concern,

My name is Scott Snow and I am a Board Certified Music Therapist (MT-BC) working for the Southern Worcester County Educational Collaborative.

*Music Therapy is the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program. (American Music Therapy Association definition, 2005)*

### Benefits of Music Therapy Treatment:

- Increased expressive/receptive communication skills
- Increased ability to concentrate
- Improved social and behavioral skills
- Improved ability to follow verbal directions
- Increased awareness of self and others
- Increased fine and/or gross motor coordination
- Decreased tactile and auditory defensiveness

One big difference between music therapy and music education is that music therapy helps clients develop non-musical goals. Formal music training and lessons are not required to be a good candidate for music therapy services. Use the Music Therapy Assessment Checklist included in this referral packet to determine if a child is likely to better access the curriculum and make adequate progress in their IEP goals and objectives by incorporating music therapy services into their education.

Consider these questions to help determine if a student is a candidate for a music therapy assessment:

- Can the student be motivated to attempt/complete tasks through the use of music?
- Can the student benefit from the use of additional communication modalities?
- Does the student initiate interaction with music or musical instruments in the classroom or at home?
- Does the student retain information conveyed in songs more easily than conveyed in spoken interchanges?

### What is a music therapy assessment?

A music therapy assessment includes the general categories of cognitive, physical, emotional, communicative, and social functioning focused on the client's needs and strengths. The client's history, interviews with parent/guardian, teachers, and staff; client/therapist music experiences will be part of the overall assessment to determine if music therapy will help the student better access his/her curriculum.

### What is a typical music therapy session?

Carefully planned music-focused interventions support the student to meet stated goals and objectives. Sessions usually begin with a welcome song and end with a closing song. The music covered is always age-appropriate and often inspired by the client's musical preferences.

I am available for assessments, direct service (individual and/or group), consultation, and in-services (to both member and non-member districts.)

Member Districts: Auburn ~ Dudley-Charlton ~ Grafton ~ Leicester ~ Millbury ~ Oxford ~ North Brookfield  
Northbridge ~ Sutton ~ Quaboag Regional ~ Southbridge ~ Spencer/East Brookfield ~ Union 61/Tantasqua ~ Webster

Please include the following forms:

- Current Individual Education Plan (IEP)
- Music Therapy Referral Form
- Music Therapy Assessment Checklist

I look forward to working with you and your students in the future. Please don't hesitate to call with further questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott Snow, MT-BC". The signature is stylized with a large, sweeping initial "S" and "N".

Scott Snow, MT-BC

[scottsnow123@charter.net](mailto:scottsnow123@charter.net)

774-230-3928



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### Referral Form

Please complete and *fax* or *mail* to:

Southern Worcester County Educational Collaborative (S.W.C.E.C.)

P.O. Box 517 Southbridge, MA 01550

Attn: Dr. Melissa Manzi, DPT

Phone: 508-764-8500

Fax: 508-764-2724

### Please check requested Assessment/Service(s):

- |  |  |
|--|--|
| <input type="checkbox"/> Adaptive PE               | <input type="checkbox"/> Orientation and Mobility              |
| <input type="checkbox"/> Assistive Technology      | <input type="checkbox"/> Vision (Functional Vision Assessment) |
| <input type="checkbox"/> Teacher of the Deaf       | <input type="checkbox"/> Vocational and Life Skills Evaluation |
| <input type="checkbox"/> Learning Media Assessment | <input type="checkbox"/> Speech Language Pathologist           |
| <input type="checkbox"/> Music Therapy             | <input type="checkbox"/> Occupational Therapy                  |
| <input type="checkbox"/> Physical Therapy          | <input type="checkbox"/> Psycho-Educational                    |

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### Please Print Clearly:

Today's date: \_\_\_\_/\_\_\_\_/\_\_\_\_

District; \_\_\_\_\_

Referred by: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Reason for Referral: \_\_\_\_\_

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

# Music Therapy Referral Form

Student's Full Name: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: M F Student's Age: Years:\_\_\_\_ Months:\_\_\_\_

Grade:\_\_\_\_ School: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Teacher: \_\_\_\_\_ Teacher email: \_\_\_\_\_

Date Parent/Guardian permission was obtained: \_\_\_\_/\_\_\_\_/\_\_\_\_

Consultation/Assessment approved by: \_\_\_\_\_  
(SIGNATURE OF AUTHORIZED SPECIAL EDUCATION REPRESENTATIVE)

**\*Please submit the following forms/documentation with the Referral Form. These forms are required BEFORE an assessment can be conducted;**

## Music Therapy:

\_\_\_\_\_ Current Individual Education Plan (IEP)

\_\_\_\_\_ Music Therapy Assessment Checklist

\_\_\_\_\_ Copy of signed Parent/ Legal Guardian Consent form

\_\_\_\_\_ List of other services student receives (if applicable)

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## Music Therapy Assessment Request Checklist

NAME:

DATE OF BIRTH:

SCHOOL AND DISTRICT:

FILLED OUT BY:

This form was developed in order to aid IEP teams in determining if a student could be a candidate for a music therapy eligibility assessment. Please consult with the teacher, parent(s), therapists and other members of the IEP team and fill out this form based on their responses. Focus on a comparison of behaviors and skills demonstrated during musical activities versus those demonstrated during nonmusical activities. Please circle the appropriate response.

### Does the student demonstrate a significantly increased response to music stimuli in the following skill areas?

#### COGNITIVE FUNCTION:

General alertness, attention	yes	no	same don't know
Attention to task	yes	no	same don't know
Ability to follow directions	yes	no	same don't know
Attempting difficult or disliked tasks	yes	no	same don't know
Comprehension of information	yes	no	same don't know
Sequencing tasks	yes	no	same don't know
Repeating patterns	yes	no	same don't know

#### COMMUNICATION:

Vocalization/verbalization	yes	no	same don't know
Use of gestures and/or signs	yes	no	same don't know
Verbalizing/singing to complete familiar phrases	yes	no	same don't know
Verbalizing/singing to complete phrases or sentences	yes	no	same don't know
Sing better than speak	yes	no	same don't know
Speech prosody	yes	no	same don't know
Vocal volume awareness and control	yes	no	same don't know

#### SOCIAL/EMOTIONAL/BEHAVIORAL FUNCTION:

Eye contact	yes	no	same don't know
Remaining in group	yes	no	same don't know
Taking turns	yes	no	same don't know
Attempting/completing tasks as modeled by others	yes	no	same don't know
In seat behaviors	yes	no	same don't know
Self esteem	yes	no	same don't know
Ability to identify emotions in self and others	yes	no	same don't know
Ability to process emotions of self and others	yes	no	same don't know

#### SENSORY/MOTOR FUNCTION

Grasps objects/instruments	yes	no	same don't know
Uses bilateral grip	yes	no	same don't know
Gross motor movement	yes	no	same don't know
Fine motor skill	yes	no	same don't know
Moves across midline	yes	no	same don't know
Visual-motor coordination	yes	no	same don't know
Steady, even gait	yes	no	same don't know

**If after using this form, the IEP team determines that the student IS appropriate for a music therapy eligibility assessment, please contact a qualified, board-certified music therapist.**

