MRVED - Minnesota Valley Area Learning Center TARGETED SERVICES REFERRAL FORM - Keep in cum folder for 3 years

Use this form to initiate the process of referring a student to a Targeted Services -- specialized summer or after school program. Classroom teachers must complete sections 1-5. The office will complete section 6 and return the form to the building principal.

Section 1:	Personal Information (Note: Grade level should be current year or, IF SUMMER PROGRAM, grade level that the student will enter in the f								
STUDENT					GENDER_		GRADE		
REFERRING TEACHER/TEAM					DATE				
Section 2:	Graduatio	n Incenti	ves (GI) Criteri	a					
qualify in at leas	st one of the	areas liste	ed in this section					d 11, need at least one	
2.	least one ye egnant or a peen assess been physical experienced experienced aks English a been excludironically trua been referre	ar behind parent. Sed as che ally or sex mental he homeless as a second ed or expedint or has d by a sch	in completing commically dependent ually abused. ealth problems. these in the last and language or helled according to withdrawn from tool district for e	six months. as limited English po sections 121A.40 school. nrollment in an eligi	orily. proficiency.			69.	
ТЕСТ	TYPE	MATH	READING	WRITING	TEST TYPE	MATH	READING	WRITING	
NWE		WATT	READING	WAITING	MCA	IVIATO	READING	WRITING	
ITBS	^			+	Other:			+	
STAF)				Other.			+	
	`								
CAT									
Section 4: Social /Personal Qualifiers Low motivationAcademic failure in current classesFailure to complete assigned workDoes not demonstrate study skills			Failure of teacher administered testsDifficulty in classes of large sizeExcessive absenteeismIsolation from peersExcessive off task behaviors			Socially inappropriate commentsPoor organizational skillsLow self-esteem/self-concept			
Section 5:Reading S		Skill Dev	•	s (1) Most Importar	it (2) Less Important (Personal Skill	