

West Tisbury School  
Student At-Risk Referral Form

**General Information**

Student Name: \_\_\_\_\_

Referring Teacher(s): \_\_\_\_\_

Have Parents been informed about this concern: \_\_\_\_\_ Yes \_\_\_\_\_ No

Parent Input:

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

Does this child have significant \_\_\_\_\_ absences? \_\_\_\_\_ tardiness?

Totals: \_\_\_\_\_ absent \_\_\_\_\_ tardy

**Reason for Referral (Primary Concern):**

\_\_\_\_\_ Academic \_\_\_\_\_ Behavioral \_\_\_\_\_ Emotional \_\_\_\_\_ Medical

Please describe the specific concerns prompting this referral. What makes learning difficult for this student?

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

What are the student's strengths, talents or special interests?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

What have you tried to do to resolve this problem?

\_\_\_\_\_

\_\_\_\_\_

How did it work?

\_\_\_\_\_

\_\_\_\_\_

Please provide any additional pertinent information such as this student's most recent report card, schedule, and attendance record and return with referral.

# West Tisbury School RTI Referral Screening Tool

STUDENT \_\_\_\_\_ TEACHER \_\_\_\_\_ GRADE \_\_\_\_\_

DATE COMPLETED \_\_\_\_\_

Based on your knowledge from observations of this student, circle the number best representing his/her behavior. After answering the questions, please record any comments about the student on the reverse side.

1. What is your estimate of the student's class standing in comparison of that of his/her classmates?	UPPER 5	4	MIDDLE 3	2	LOWER 1	ACADEMICS	<input type="checkbox"/>		
2. How does the student's achievement compare to your estimation of her/her potential?	EQUAL 5	4	LOWER 3	2	MUCH LOWER 1			ATTENTION	<input type="checkbox"/>
3. What is the student's reading level, reading ability group or reading readiness group in the classroom (e.g., a student with average reading ability performs in the middle group)?	UPPER 5	4	MIDDLE 3	2	LOWER 1				
4. How distractible is the student in comparison to his/her classmates?	NOT VERY 5	4	AVERAGE 3	2	VERY 1	CLASS PARTICIPATION	<input type="checkbox"/>		
5. What is the student's attention span in comparison to that of his/her classmates?	LONGER 5	4	AVERAGE 3	2	SHORTER 1			SCHOOL BEHAVIOR	<input type="checkbox"/>
6. How often does the student hesitate or become confused when responding to oral directions (e.g., "Turn to page . . .")?	NEVER 5	4	OCCASIONALLY 3	2	FREQUENTLY 1				
7. How does the student's comprehension compare to the average understanding ability of her/her classmates?	ABOVE 5	4	AVERAGE 3	2	BELOW 1	CLASS PARTICIPATION	<input type="checkbox"/>		
8. How does the student's vocabulary and word usage skills compare with those of other students in his/her age group?	ABOVE 5	4	AVERAGE 3	2	BELOW 1			SCHOOL BEHAVIOR	<input type="checkbox"/>
9. How proficient is the student at telling a story or relating happenings from home when compared to classmates?	ABOVE 5	4	AVERAGE 3	2	BELOW 1				
10. How often does the student volunteer information to class discussions or in answer to teacher questions?	FREQUENTLY 5	4	OCCASIONALLY 3	2	NEVER 1	SCHOOL BEHAVIOR	<input type="checkbox"/>		
11. With what frequency does the student complete his/her class and homework assignments within the time allocated?	ALWAYS 5	4	USUALLY 3	2	SELDOM 1			PARTICIPATION	<input type="checkbox"/>
12. After instruction, does the student have difficulty starting to work (looks at other students working or asks for help)?	NEVER 5	4	OCCASIONALLY 3	2	FREQUENTLY 1				
13. Does the student demonstrate any behaviors that seem unusual or inappropriate when compared to other students?	NEVER 5	4	OCCASIONALLY 3	2	FREQUENTLY 1	PARTICIPATION	<input type="checkbox"/>		
14. Does the student become frustrated easily, sometimes to the point of losing emotional control?	NEVER 5	4	OCCASIONALLY 3	2	FREQUENTLY 1			SCHOOL BEHAVIOR	<input type="checkbox"/>
15. In general, how would you rank the student's relationship with peers (ability to get along with others)?	GOOD 5	4	AVERAGE 3	2	POOR 1				