

***Township of Union Public Schools
Intervention and Referral Services
Academic Observation and Intervention Form***

Student's name: _____ Grade: _____

Teacher's name: _____ Subject: _____

Pre-referral of at-risk students must be based upon specific student performance which you have actually observed. As a rule, an isolated instance of poor or unsatisfactory performance will not be grounds for referring a student and input is necessary from classroom teachers, specials teachers, and other support staff. These observations/comments are vital to the I&RS evaluation process. Thank you for taking the time to complete this form.

ACADEMICS - Check all that apply. Add other observations/comments, if necessary. For each area checked include statement of frequency and duration (ex: Student is unprepared for class 4 out of 5 days a week)

ACADEMIC PERFORMANCE:

- | | |
|---|---|
| <input type="checkbox"/> Failure to complete class work assignments | <input type="checkbox"/> Lacks organizational skills |
| <input type="checkbox"/> Failure to complete homework assignments | <input type="checkbox"/> Failure in one or more subject areas |
| <input type="checkbox"/> Decline in grade earned | <input type="checkbox"/> Decline in quality of work |
| <input type="checkbox"/> Needs directions given individually | <input type="checkbox"/> Does not ask for help when needed |
| <input type="checkbox"/> Low test/quiz scores | <input type="checkbox"/> Other (please specify) |

COMMENTS (Attach additional sheets as needed)

CURRENT GRADES (including, but not limited to: class work, homework, quizzes, tests, projects)

ACADEMIC STRENGTHS: _____

ACADEMIC CHALLENGES: _____

TURN OVER

Student name: _____ Grade: _____

PRIOR INTERVENTION AND STRATEGIES:

Please indicate the types of interventions/strategies you have tried prior to this request for assistance by writing the date(s) on the line next to each intervention. Please indicate whether the strategy was successful or unsuccessful.

If unsuccessful, please explain outcome. Attach additional sheets as needed

	Date(s)	Outcome
Reviewed CUM folder in counselor's office		
Spoke with student		
Consulted with/contacted parent or guardian		
Consulted with counselor		
Consulted with administrator		
Used state testing results to drive instruction		
Gave student work at his/her level		
Reduced quantity of work given		
Worked with student one-on-one for extra help		
Allowed use of calculator/manipulatives		
Broke multi-step problems into smaller problems		
Avoided open-ended questions		
Highlighted key words and directions		
Reduced amount of writing		
Graded content only (not mechanics)		
Provided testing in a different format		
Provided visual examples for projects/activities		

Please share any other information you think might be relevant to the creation of an intervention plan:
