

## Intervention Considerations Prior to Evaluation

**This questionnaire must be submitted to the Special Education office prior to the initiation of a referral to Special Education.**

No student may be placed in special education based solely on the command of the English language or different cultural lifestyle. No student may be placed in special education if there has been a lack of educational opportunity (absences, frequent moves). No child may be placed in special education if there is no educational need for services. No student may be placed in special education if there is a physical problem that is keeping him/her from being successful that can be corrected (glasses, hearing aids, etc). If you answer "yes" to the majority of the questions listed below then you may proceed to refer the student for evaluation to determine the need for special education services. Send this document to the Special Education office. Please remember that if a student qualifies for special education services he/she cannot be treated the same as other students with regard to discipline, academics, or behavior. All referrals should be made as a last resort.

Student: \_\_\_\_\_ Race: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_ Teacher: \_\_\_\_\_ Principal's signature: \_\_\_\_\_

Yes No

- \_\_\_ \_\_\_ 1. Did the student pass the vision/hearing screening done by the school nurse? (attach copy)  
If the answer is no, you cannot proceed with the referral until vision/hearing is corrected.
  - \_\_\_ \_\_\_ 2. After the student's physical problem(s) have been corrected (glasses, hearing aids, etc.), has the student been given at least one full grading period to determine if there is still an educational need for evaluation?
  - \_\_\_ \_\_\_ 3. Has the student been tested for special education previously? Date \_\_\_\_\_ If testing was less than one year ago, a referral to special education should **not** be made.
  - \_\_\_ \_\_\_ 4. Is the student failing one or more academic classes? If the answer is no, a referral should not be made without talking to the Special Education office and providing adequate documentation to show an educational need.
  - \_\_\_ \_\_\_ 5. Has the student been retained? If yes, what grade? \_\_\_\_\_
  - \_\_\_ \_\_\_ 6. Has the student been given the opportunity to succeed through modifications/adaptations provided by general education classroom teacher(s), i.e. 504, At-Risk, etc.? If the answer is no, the referral to special education should **not** be made until modifications have proven unsuccessful (at least one full grading period). Attach campus intervention team documentation.
  - \_\_\_ \_\_\_ 7. Does the student speak and understand the English language? (attach Home Language Survey)
  - \_\_\_ \_\_\_ 8. If the student is LEP, has he/she participated in ESL and/or bilingual classes a sufficient length of time to determine if the suspected problem is evident in the native language? (attach LPAC information) If the answer is no, a referral to special education should **not** be made.
  - \_\_\_ \_\_\_ 9. Does the student attend tutorials regularly and still struggle in class?
  - \_\_\_ \_\_\_ 10. Does the student attend school regularly (has not missed more than 10% of class days) If the answer is no, a referral should not be made to special education without talking to the Special Education office and providing adequate documentation to show that there has not been a lack of education opportunities.
  - \_\_\_ \_\_\_ 11. When the student is absent and all the work missed is made up, is the student still failing?
  - \_\_\_ \_\_\_ 12. Has the student failed state-mandated assessment (TAKS, TPRI, etc.)?
  - \_\_\_ \_\_\_ 13. Does the student have poor organizational skills?
  - \_\_\_ \_\_\_ 14. Is the student able to follow school rules?
  - \_\_\_ \_\_\_ 15. Does the student's behavior interfere with academic performance?
  - \_\_\_ \_\_\_ 16. Does the student exhibit poor impulse control or inability to maintain focus?
- Additional Questions to be answered for Speech Referral only:**
- \_\_\_ \_\_\_ 17. Does the student appear to misunderstand information given in class?
  - \_\_\_ \_\_\_ 18. Is the student unable to discriminate similar sounds such as *s* and *z*, *p* and *b*. *f* and *th* ?
  - \_\_\_ \_\_\_ 19. Is the student unable to adequately express his/her ideas orally? Mispronounce words?
  - \_\_\_ \_\_\_ 20. Does the problem interfere with the child's functioning in the classroom?

Date Received by Special Education Director: \_\_\_\_\_

ACTION TAKEN: \_\_\_\_\_ Referral packet sent to campus

\_\_\_\_\_ Additional information requested: \_\_\_\_\_

\_\_\_\_\_ Sent back to campus intervention team for further interventions

