

### Student Assistance Team (SAT) Referral Form

\*SAT is a problem-solving team that designs interventions to assist a student in gaining behavioral, social or academic skills in the general education setting.

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parents/Guardians \_\_\_\_\_ Parents first notified of concern(s) on \_\_\_\_\_

**Area(s) of Concern**

- Reading     Writing     Math     Attention     Speech/Language
- Behavioral     Social     Emotional     Health     Hearing     Vision

**What would you like this student to be able to do that he/she does not presently do?**

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**What interventions/accommodations have you attempted?**

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**Student strengths/interests (academically, behaviorally, and socially).**

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**Relevant medical and emotional health information, or home/family factors.**

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**Other**

Days absent/tardy \_\_\_\_\_

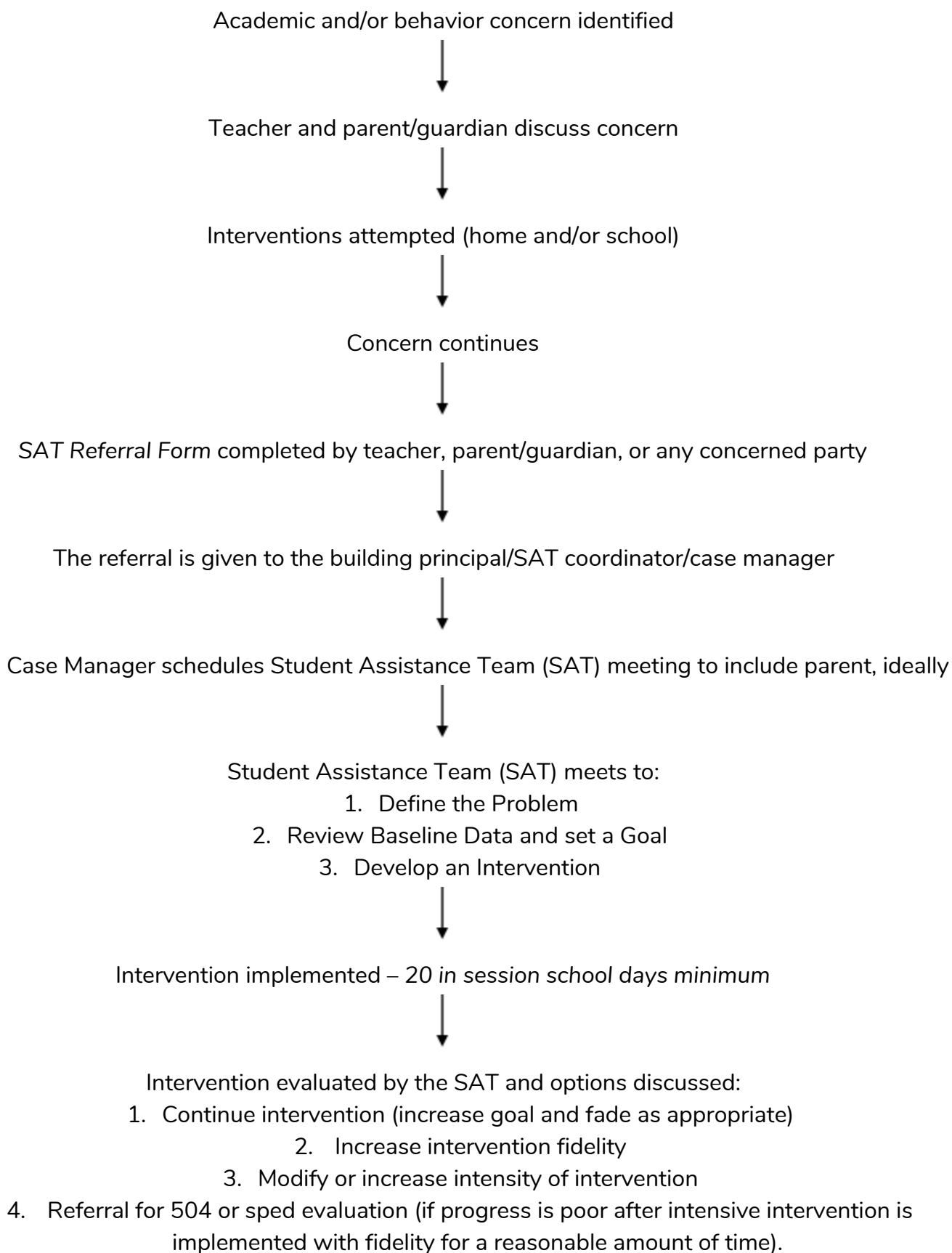
Has this student ever been retained? If so, please indicate grade(s) \_\_\_\_\_

\*\*Attach intervention data/baseline data as well as additional information, such as grades, district wide testing, progress monitoring, behavior reports, or work samples.

Referring person's signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*Submit form to Building Principal and/or SAT Coordinator

## SAT Process Flowchart



**Initial SAT Meeting (Date\_\_\_\_\_)**

\*\*Attach to referral

**Step 1: Define and Analyze the Problem** (Define the main concern in observable, measurable terms using the referral information).

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**Step 2: Baseline Data** (Compare current level of performance/behavior vs. expected level of performance/behavior).

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**Goal** (e.g. at the end of 6 weeks, when given a 2<sup>nd</sup> grade reading passage, student will read with an expected performance of 45 words per minute).

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Progress Monitoring Data Collection Plan to determine if the student is making progress toward the above stated goal (e.g. weekly progress monitoring with DIBELS level 2 ORF).

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**Step 3: Intervention Plan**

Intervention Procedures

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Interventionist	Materials	When/Where	Minutes/Session and Sessions/Week	Start Date

**Classroom accommodations** in addition to implementing interventions to allow the student to experience more success.

### Lesson Presentation

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|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Pre-teach vocabulary</li> <li><input type="checkbox"/> Give directions in small distinct steps</li> <li><input type="checkbox"/> Have students repeat instructions.</li> <li><input type="checkbox"/> Increased “think time”</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Increased “think time”</li> <li><input type="checkbox"/> Extend time requirements</li> <li><input type="checkbox"/> Visual daily schedule</li> <li><input type="checkbox"/> Calendar/Assignment book</li> <li><input type="checkbox"/> Other _____</li> </ul> |
|---|---|

### Behavior/ Classroom Environment

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|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Teach expected behaviors</li> <li><input type="checkbox"/> Seat near teacher</li> <li><input type="checkbox"/> Reduce/minimize distractions</li> <li><input type="checkbox"/> Planned seating</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Additional breaks for movement</li> <li><input type="checkbox"/> Positive, specific verbal praise</li> <li><input type="checkbox"/> Offer choices</li> <li><input type="checkbox"/> Use strengths/interests often</li> <li><input type="checkbox"/> Other _____</li> </ul> |
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### Assignments/Grading

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|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Avoid penalizing for spelling errors</li> <li><input type="checkbox"/> Dictate ideas to a peer/adult.</li> <li><input type="checkbox"/> Reduced assignments</li> <li><input type="checkbox"/> Provide a structure for writing, such as a graphic organizer</li> <li><input type="checkbox"/> Brainstorming techniques</li> <li><input type="checkbox"/> Shorten spelling lists.</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Use audio books</li> <li><input type="checkbox"/> Use high interest text</li> <li><input type="checkbox"/> Don't ask student to read a loud</li> <li><input type="checkbox"/> Use of a calculator</li> <li><input type="checkbox"/> Use of number line, multiplication tables</li> <li><input type="checkbox"/> Use of manipulatives</li> <li><input type="checkbox"/> Other _____</li> </ul> |
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### Test-Taking

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|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Provide extended time</li> <li><input type="checkbox"/> Allow to answer questions orally</li> <li><input type="checkbox"/> Allow for short answer format</li> <li><input type="checkbox"/> Modify format</li> <li><input type="checkbox"/> Shorten length</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Paraphrase test items</li> <li><input type="checkbox"/> Allow student to refer to notes</li> <li><input type="checkbox"/> Re-teach/re-test material</li> <li><input type="checkbox"/> Other _____</li> </ul> |
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### Schedule Follow Up Meeting

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

### Members in attendance

_____	_____
_____	_____
_____	_____
_____	_____

Follow Up SAT Meeting # \_\_\_\_\_ Date: \_\_\_\_\_

**Step 4:** Analyze data to determine the effectiveness of interventions implemented.

Select Intervention Response (based on data)	Select a Next Step
<input type="checkbox"/> <b>Positive</b> The student <u>IS</u> making progress.	<input type="checkbox"/> Continue intervention <input type="checkbox"/> Continue intervention and increase goal. <input type="checkbox"/> Gradually fade intervention until no longer needed.
<input type="checkbox"/> <b>Poor or Questionable</b> The student <u>IS NOT</u> making adequate progress toward the goal.	<input type="checkbox"/> The intervention was not implemented with fidelity, so must develop a plan to increase implementation integrity. <input type="checkbox"/> The intervention was implemented with fidelity, so modify or increase intensity of plan. <input type="checkbox"/> Referral for a special education evaluation (if progress is poor after intensive intervention is implemented with fidelity for a reasonable amount of time).

**Plan to increase implementation integrity** (if needed).

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**Describe any changes to the intervention** (based on the above decision).

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**Classroom accommodations** (please refer to list in initial meeting form).

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**Team Member jobs between now and the next review date:**

Who \_\_\_\_\_ What \_\_\_\_\_

Who \_\_\_\_\_ What \_\_\_\_\_

**Schedule Follow Up Meeting**

Date \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_

**Members in attendance**

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