**Academic Wrap-Around Referral and Record Sheet**

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **School**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Teacher**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_­­\_\_ **Grade:** \_\_\_­­\_\_\_ **D.O.B**.: \_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_

**Reason for Referral -** □ Literacy □ Math □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Briefly describe your primary concern/goal for the student/classroom:**

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**Pertinent Assessment Results/ Data gathered:**

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**Adaptations/Strategies tried to date:**

□ Reviewed cumulative file and student history

□ Discussed concerns with parents-consider health issues, hearing, vision, changes in home/social situation.

□ Consulted with previous classroom Teachers

□ Differentiated/adapted curriculum, and instruction

**Describe classroom adaptations/strategies used to date:**

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**Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Team ideas/suggestions:**

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