



BISHOP DWENGER HIGH SCHOOL

Special Education Current Teacher Report

We appreciate your time in filling out this report. It helps to ensure proper placement and needs of this future Saint. Once this report is complete, please share it with the parent of the BDHS applicant. The parent will need to upload it to their online application. It is also helpful to attach a copy of the current ISP/IEP/CAP/504/ELL plan to this application as it will need to be uploaded as well by the parent. Also, please feel free to email it to Amy Johns, Assistant Principal, at ajohns@bishopdwenger.com.

Name of Student: _____

Circle What Applies: ISP/CAP/IEP/504/ELL Disability Qualification: _____

Modified Classroom Candidate (BDHS St. Mother Teresa Room): Yes or No

Date: _____ Current Grade Level: _____ School: _____

Name Who is Completing Report: _____ Job Title: _____

What are the student's overall strengths in class?

Areas of concern?

Does the student currently utilize the school's resource room? Yes or No If yes, in what capacity.

List what motivates the student?

How does the student cope with frustration/anxiety?

Organizational skills?

Canvas ready?

Additional Comments for overall classroom readiness: _____

Reading: Please indicate the skills demonstrated in the following areas: Reading fluency, vocabulary retention, reading comprehension, homework completion

Strengths: _____

Weaknesses: _____

Current reading level/Lexile: _____ Current WIDA Score (if applicable to ELL student): _____

Language Arts Most Recent ILEARN Testing Scores: _____ Language Arts Current NWEA Score: _____

Projected 9th Grade Class, ENGLISH: Basic English 9 Academic English 9 Honors English 9

Written Expression: Please indicate skills seen in the following areas: Spelling, grammar, sentence/paragraph structure, vocabulary usage, short answer responses, ability to respond to a prompt independently, homework completion

Strengths: _____

Weaknesses: _____

Mathematics: Please indicate the skills demonstrated in the following areas: Computation, ability to grasp new concepts, problem solving, math facts memorized, homework completion

Strengths: _____

Weaknesses: _____

Math Most Recent ILEARN Testing Scores: _____ Math Current NWEA Score: _____

Projected 9th Grade Class, MATH: Basic Algebra 1 Algebra 1 Academic Geometry Honors Geometry

****Additional Academic concerns:** _____

Social/Emotional/Behavioral Checklist

Please indicate areas of concern with an X.

- | | | |
|--|---|---|
| <input type="checkbox"/> easily distracted | <input type="checkbox"/> has difficulty working independently | <input type="checkbox"/> Has trouble staying on task |
| <input type="checkbox"/> Has incomplete work | <input type="checkbox"/> Has incorrect work | <input type="checkbox"/> needs an unusual amount of structure |
| <input type="checkbox"/> fidgets | <input type="checkbox"/> has trouble keeping hands to self | <input type="checkbox"/> abuses own or other's property |
| <input type="checkbox"/> is isolated by classmates | <input type="checkbox"/> walks around room needlessly | <input type="checkbox"/> leaves room without permission |
| <input type="checkbox"/> teases inappropriately | <input type="checkbox"/> has difficulty making/keeping friends | <input type="checkbox"/> is frequently "picked on" |
| <input type="checkbox"/> daydreams excessively | <input type="checkbox"/> blames others for mistakes | <input type="checkbox"/> verbally threatens others |
| <input type="checkbox"/> gives up easily | <input type="checkbox"/> takes property of others | <input type="checkbox"/> Gets into fights frequently |
| <input type="checkbox"/> talks out | <input type="checkbox"/> uses inappropriate language | <input type="checkbox"/> has poor personal hygiene |
| <input type="checkbox"/> is bossy | <input type="checkbox"/> leaves building without permission | <input type="checkbox"/> rushes through work |
| <input type="checkbox"/> is defiant | <input type="checkbox"/> has difficulty taking turns | <input type="checkbox"/> difficulty expressing ideas fluently |
| <input type="checkbox"/> talks back | <input type="checkbox"/> is disorganized | <input type="checkbox"/> Has difficulty following class/school rules |
| <input type="checkbox"/> is withdrawn | <input type="checkbox"/> has poor listening skills | <input type="checkbox"/> Has trouble following directions |
| <input type="checkbox"/> over-conforms | <input type="checkbox"/> has difficulty recalling previous material | <input type="checkbox"/> frequently seeks attention inappropriately |
| <input type="checkbox"/> lacks self-confidence | <input type="checkbox"/> has difficulty with sensory input | <input type="checkbox"/> uses poor judgment about safety |
| <input type="checkbox"/> appears tense/afraid | <input type="checkbox"/> expresses anger inappropriately | <input type="checkbox"/> has difficulty comprehending oral instructions |
| <input type="checkbox"/> throws objects | <input type="checkbox"/> is unable to calm self when upset | <input type="checkbox"/> has difficulty interpreting social language cues |
| <input type="checkbox"/> cries easily | <input type="checkbox"/> whines or complains frequently | <input type="checkbox"/> frustrates easily |
| <input type="checkbox"/> tires easily | <input type="checkbox"/> has trouble with transitions | <input type="checkbox"/> frequently absent/tardy |

Additional behavioral explanations: _____

Does the student require specific help outside of the classroom? Locker support, hallway navigation, restroom, nurse?

Does the student have a behavior plan? (Attach plan or explain)