

## **Evaluation (South Dakota)**

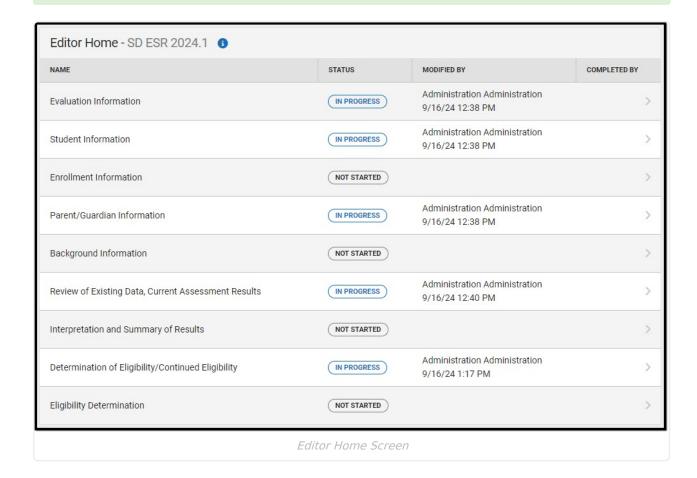
Last Modified on 03/04/2025 10:29 am CST

Tool Search: Special Ed Documents

Evaluations document the student's educational needs and determine eligibility for special education. This document describes each editor, each field on the editor, any special considerations, and instructions for using the editor and fields.

An evaluation must be created whether or not the student is determined to have a disability. The school district gives a copy of the evaluation summary report, including the documentation of eligibility, to the student's parents. For information on general functionality, navigation, and additional plan and evaluation features, see the core Plan and Evaluation Information article.

This document's current format is the **SD ESR 2024**. Evaluation formats are selected in the Special Ed Eval Types tool.



#### **Evaluation Information**



The Evaluation Information editor defines the Evaluation type and corresponding dates.

This editor must be saved before entering data into other editors.



Field	Description
Evaluation Type Required	The type of evaluation. Options include:  • Initial  • Reevaluation
Evaluation Date Required	The day of the evaluation meeting.
Consent Date Required	The day the school received consent from the student's parent/guardian(s) to evaluate their student.

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### **Student Information**

The Student Information editor pulls demographic information regarding the student. This is a read-only editor.

The **Refresh** button retrieves a fresh copy of data from the student's record.



Student Information	n (IN PROGRESS)		Editor 2 of 9
When an Evaluation is gen	erated, a snapshot of the student's i	nformation is taken from Census. Click Refre	sh to retrieve a new copy of data.
Last Name	First Name Joey	Middle Name	Suffix
Birthdate			
Address , S	D 55449	SIMS ID	
Case Manager			
Name Gregory		Title Teacher (TEACHER)	
Phone (333)333-3333			
	Sti	udent Information Editor	

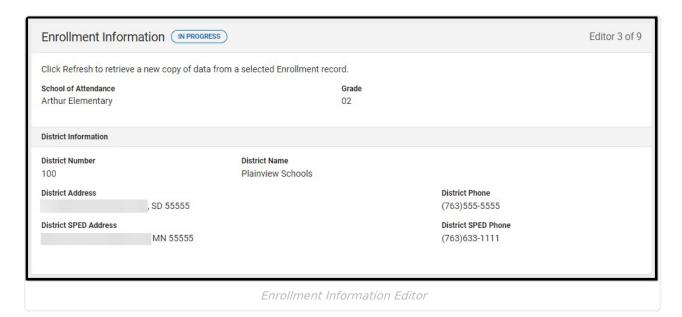
Field Name	Description	Database and UI Location (when Refreshed is clicked)
Last Name	The student's last name.	Demographics > Last Name identity.lastName
First Name	The student's first name.	Demographics > First Name identity.firstName
Middle Name	The student's middle name.	Demographics > Middle Name identity.middleName
Suffix	The student's suffix.	Demographics > Suffix Name identity.suffix
Birthdate	The student's birthdate.	Demographics > Birth Date identity.birthDate
Address	The student's address.	Households > Address Info  address.number; address.street; address.tag; address.prefix; address.dir; address.apt; address.city; address.state; address.zip



Field Name	Description	Database and UI Location (when Refreshed is clicked)
SIMS ID	The student's ID number.	Enrollment > Student State ID
		identity.studentNumber
Case Manager Information		
Name	The first and last name of the team member.	Student Information > Special Ed Team Members
Title	The role of the team member.	Student Information > Special Ed Team Members
Phone	The phone number of the team member.	Student Information > Special Ed Team Members

### **Enrollment Information**

The Enrollment Information editor is a read-only editor that pulls in district and school information where the student is enrolled.



#### ▶ Click here to expand...

Field	Description	Validation
School of Attendance	The school where the student attends.	Upon Refresh, this field is pulled from the Enrollment tool and cannot be modified.



Field	Description	Validation
Grade	The student's grade.	Upon Refresh, this field is pulled from the Enrollment tool and cannot be modified.  Database Location: enrollment.grade
District Information	1	
District Number	The district number associated with the Enrolled school.	District Information > State District Number
District Name	The district name associated with the Enrolled school.	District Information > Name
District Address	The district address associated with the Enrolled school.  District Information > Ad	
District Phone	The district phone number associated with the Enrolled school.	District Information > Phone
District SPED Address	The district special education address associated with the Enrolled school.	District Information > SPED Address
District SPED Phone	The district special ed phone number associated with the Enrolled school.	District Information > SPED Phone

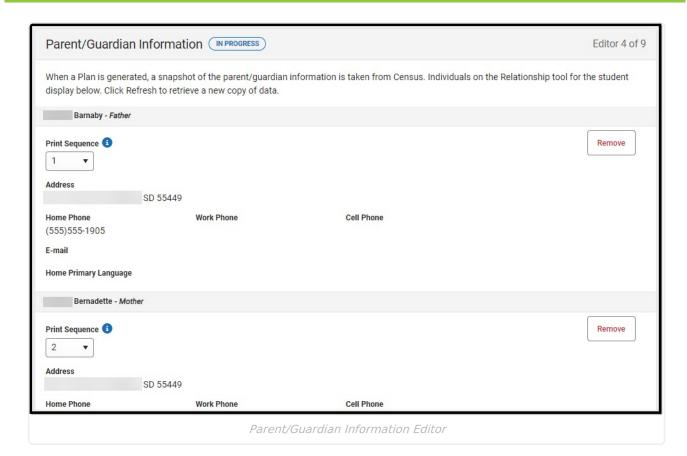
## **Parent/Guardian Information**

The Parent/Guardian Information editor populates based on the guardian checkbox on the student's Relationships tool. It includes Demographic information for the student's guardian.

The **Delete** button next to each parent/guardian can be used to remove a parent/guardian from the IEP.

The **Refresh** button retrieves a new copy of parent/guardians' data. This also returns any accidentally deleted people. Manually entered fields do not change when the refresh button is clicked. The user must Save after clicking Refresh to capture changes.





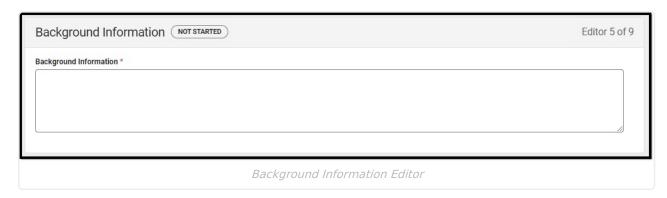
Field	Description
Print Sequence	The order in which the parent/guardian displays.
Name	The name of the parent/guardian.
Address	The address of the parent/guardian.
Home Phone	The parent/guardian's home phone.
Work Phone	The parent/guardian's work phone.
Cell Phone	The parent/guardian's cell phone.
Email	The parent/guardian's email.
Home Primary Language	The language the parent/guardian speaks at home.

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## **Background Information**

The Background Information editor documents any background information pertinent to the student and their evaluation. The only field on this editor is Background Information. This field is limited to 8000 characters.





## **Review of Existing Data**

The Review of Existing Data editor documents existing data pertaining to the student's disability before this evaluation was conducted. The only field on this editor is the Data Review field. This field is required and limited to 8000 characters.

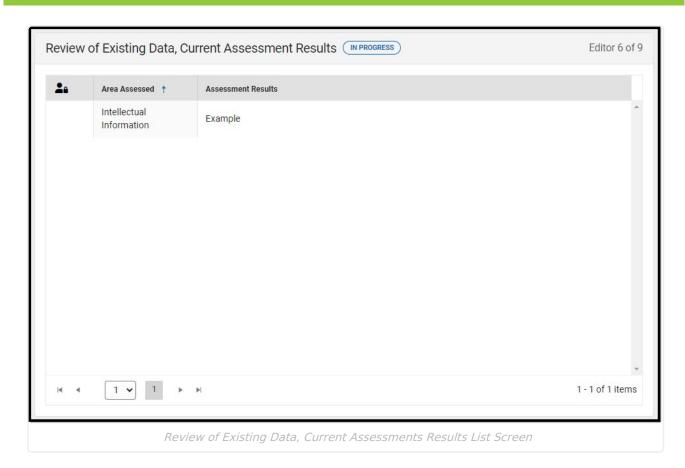


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# Review of Existing Data, Current Assessments Results

The Review of Existing Data, Current Assessment Results editor documents the areas in which the student was assessed during the evaluation process and the results of those assessments.





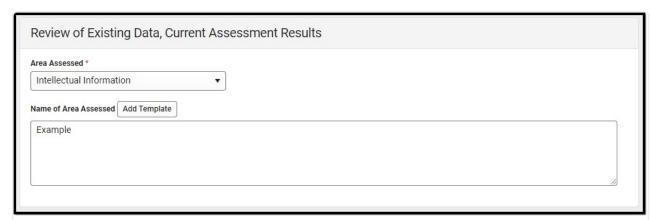
## Review of Existing Data, Current Assessments Results List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Area Assessed	The area assessed.
Assessments Results	The first 100 characters of the results of the assessment description.

## Review of Existing Data, Current Assessments Results Detail Screen

Select an existing record or click **New** to open the detail screen.





Review of Existing Data, Current Assessments Results Detail Screen

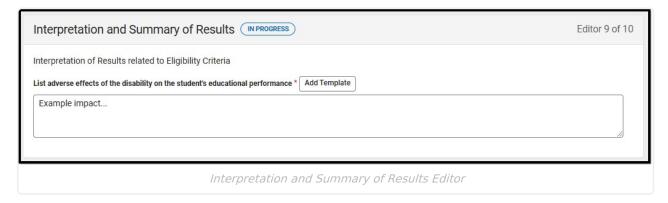
Field Name	Description	Validation
Area Assessed Required	The area assessed. Click the Click to expand link to view available options.  Click here to expand  Ability Academic Achievement Observation Adaptive Behavior Language Articulation Fluency Social Communication Behavior Functional Behavior Assessment Social/Emotional Autism Specific Instrument Fine Motor Sensory Gross Motor Visual Motor Developmental Delay Areas Chronic/Acute Health (diagnosis) Audiological (hearing) Ophthalmological (Vision) Medical Data for Orthopedic Impairment Transition Other	N/A
Date Assessment Given Required	The day the assessment was administered.	N/A



Field Name	Description	Validation
Specify Other *Required	The other area assessed.	This field is available and required when Other is selected as the Area Assessed.
Name of Area Assessed Required	A description of the results of the assessment.	The name of this field changes to the value selected in the Area Assessed dropdown.  The Template Bank associated with this field is SD Eval Assessment Areas.  This field is limited to 8000 characters.

## **Interpretation and Summary of Results**

The Interpretive and Summary of Results editor documents the team's interpretation of the evaluation and the assessment results. The only field on this editor is "List adverse effects of the disability on the student's educational performance." This field is required and limited to 8000 characters. The Template Bank associated with this field is SD Eval Interpretation.

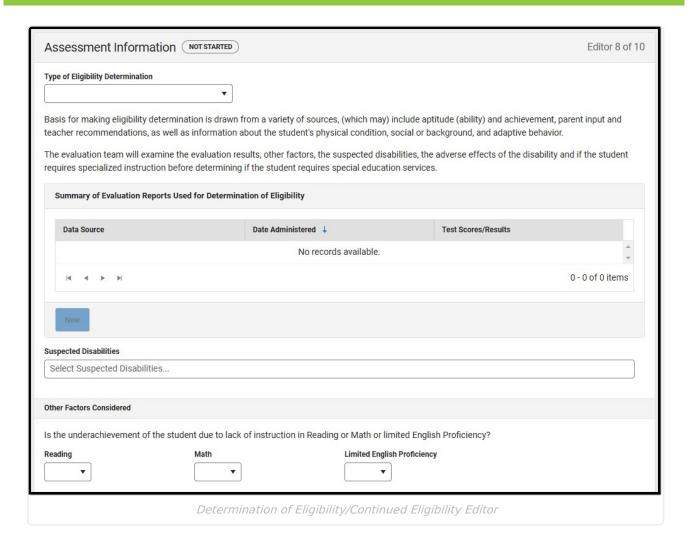


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#### **Assessment Information**

The Assessment Information editor documents the student's suspected disabilities, and the data sources used to make the determination.





Field	Description
Type of Eligibility Determination	The type of eligibility determination. Options include:  • Initial Determination of Eligibility  • Re-determination of Eligibility

#### **Summary of Evaluation Reports Used for Determination of Eligibility**

Columns in this table include:

- Data Source
- Date Administered
- Test Scores/Results
- Evaluator

See the Evaluations Administered Side Panel section for information about entering data into this table.



Field	Description	
Suspected Disabilities	The student's suspected disabilities. Multiple options may be selected. Options include:  • 500 - Deaf Blindness  • 505 - Emotional Disability  • 510 - Cognitive Disability  • 515 - Hearing Loss  • 525 - Specific Learning Disability  • Multiple Disabilities  • 535 - Orthopedic Impairment  • 540 - Vision Loss  • 545 - Deafness  • 550 - Speech/Language Impairment  • 555 - Other Heath Impaired  • 560 - Autism Spectrum Disorder  • 565 - Traumatic Brain Injury  • 570 - Developmental Delay	
Other Factors Considered  Is the underachievement of the student due to lack of instruction in Reading or Math or limited  English Proficiency?		
Reading	Indicates the underachievement of the student is due to a lack of instruction in reading. Options are Yes or No.	
Math	Indicates the underachievement of the student is due to a lack of instruction in math. Options are Yes or No.	
Limited English Proficiency	Indicates the underachievement of the student is due to a lack of instruction in limited English Profieciency. Options are Yes or No.	
Eligibility Determination		
Student has a diagnosed disability	Indicates the student has a diagnosed disability. Options are Yes or No.	
The disability adversely affects the student's educational performance	Indicates the student's disability impacts their educational performance. Options are Yes or No.	
List the adverse effects of the disability on the student's educational performance *Required	A description of the adverse effects of the student's disability on their education.  *This field is available and required when Yes is selected from the "The disability adversely affects the student's educational performance" field.  This field is limited to 8000 characters.	



Field	Description
The student required specially designed instruction to receive a free appropriate public education	Indicates the student requires specially designed instruction for their education. Options are Yes or No.
The team determined this student meets eligibility criteria under the following category	The disability the student has determined by the team.  Options include:  • 500 - Deaf Blindness  • 505 - Emotional Disability  • 510 - Cognitive Disability  • 515 - Hearing Loss  • 525 - Specific Learning Disability  • 535 - Orthopedic Impairment  • 540 - Vision Loss  • 545 - Deafness  • 550 - Speech/Language Impairment  • 555 - Other Heath Impaired  • 560 - Autism Spectrum Disorder  • 565 - Traumatic Brain Injury  • 570 - Developmental Delay
Multiple Disabilities - 530	
Category 1	The first disability the student has when they have multiple disabilities. Options include:  500 - Deaf Blindness  505 - Emotional Disability  510 - Cognitive Disability  515 - Hearing Loss  525 - Specific Learning Disability  535 - Orthopedic Impairment  540 - Vision Loss  545 - Deafness  550 - Speech/Language Impairment  555 - Other Heath Impaired  560 - Autism Spectrum Disorder  565 - Traumatic Brain Injury  570 - Developmental Delay



Field	Description	
Category 2	The second disability the student has when they have multiple disabilities. Options include:  • 500 - Deaf Blindness  • 505 - Emotional Disability  • 510 - Cognitive Disability  • 515 - Hearing Loss  • 525 - Specific Learning Disability  • 535 - Orthopedic Impairment  • 540 - Vision Loss  • 545 - Deafness  • 550 - Speech/Language Impairment  • 555 - Other Heath Impaired  • 560 - Autism Spectrum Disorder  • 565 - Traumatic Brain Injury  • 570 - Developmental Delay	
Category 3	The third disability the student has when they have multiple disabilities. Options include:  • 500 - Deaf Blindness  • 505 - Emotional Disability  • 510 - Cognitive Disability  • 515 - Hearing Loss  • 525 - Specific Learning Disability  • 535 - Orthopedic Impairment  • 540 - Vision Loss  • 545 - Deafness  • 550 - Speech/Language Impairment  • 555 - Other Heath Impaired  • 560 - Autism Spectrum Disorder  • 565 - Traumatic Brain Injury  • 570 - Developmental Delay	
Related Service(s): Student therapy needs to be determined during IEP program development ARSD 24:05:27:22, 24:05:27:23, 24:05:27:24, 24:05:27:25, and 24:05:27:16  Criteria for Occupational Therapy Services		
1. The student has a disability and requires special education	Indicates the student requires special education for occupational therapy services. Options are Yes or No.	



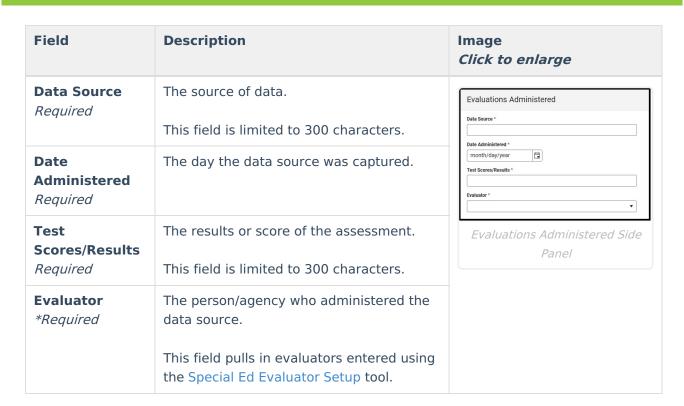
Field	Description	
2. The student must demonstrate performance on a standardized assessment instrument that falls at least 1.5 standard deviations below the mean in one or more of the following areas: fine motor, sensory integration or visual	Indicates the student's performance falls at least 1.5 standard deviations below the mean for occupational skills. Options are Yes or No.	
Criteria for Physical Therapy Services		
1. The student has a disability and requires special education	Indicates the student requires special education for physical therapy services. Options are Yes or No.	
2. The student must demonstrate performance on a standardized assessment instrument that falls at least 1.5 standard deviations below the mean on a standardized motor assessment instrument	Indicates the student's performance falls at least 1.5 standard deviations below the mean for physical skills. Options are Yes or No.	
Speech-Language Pathology		
1. The student has a disability and requires special education	Indicates the student requires special education for speech-language pathology services. Options are Yes or No.	
Transition: For student that are eligible for special education services, transition must be in effect no later than age 16 ARSD 24:05:27:13.02 and 24:05:27:01.03		
1. The student has a disability and requires special education	Indicates the student requires transition services. Options are Yes or No.	

#### **Evaluations Administered Side Panel**

Select an existing record or click **New** to open the Evaluations Administered side panel. The editor must be saved before records can be entered into this table.

Field D	Description	Image Click to enlarge
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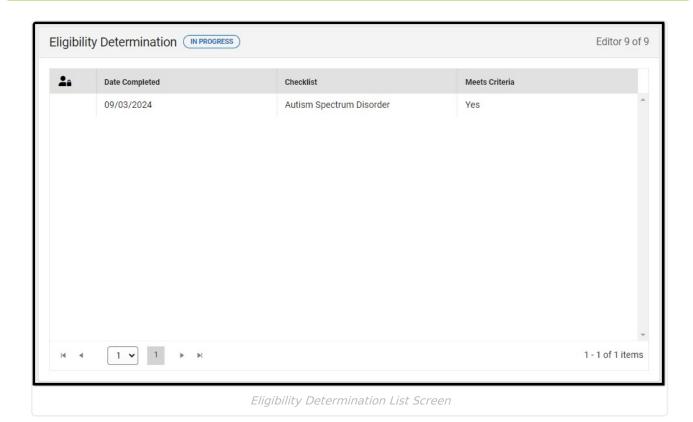




## **Eligibility Determination**

The Eligibility Determination editor documents the team's decision about whether the student meets the criteria for their suspected disabilities. Depending on which disability is selected, the editor's fields change.



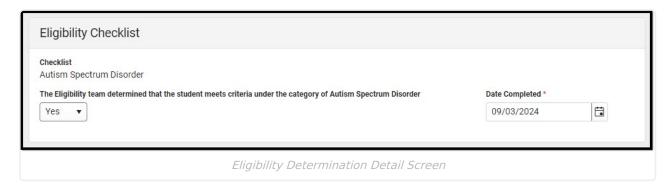


#### **Eligibility Determination List Screen**

Column Name	Description
Padlock Icon	The user currently editing the record.
Date Completed	The day the checklist was determined.
Checklist	The disability.
Meets Criteria	An indication that the student meets the criteria for the disability.

## **Eligibility Determination Detail Screen**

Select an existing record or click **New** to open the detail screen. The Detail Screen changes depending on the disability selected in the Eligibility Checklist field.





Field	Description	Validation
Eligibility Checklist Required	The student's disability. Options include:  • Autism Spectrum Disorder  • Cognitive Disability  • Deafness  • Deaf Blindness  • Developmental Delay  • Emotional Disability  • Hearing Loss  • Orthopedic Impairment  • Other Health Impaired  • Specific Learning Disability  • Speech/Language Impairments  • Traumatic Brain Injury  • Vision Loss	Once a record is created with one of the listed disabilities, that option is removed from the dropdown.
The Eligibility team determined that the student meets criteria under the category of "Disability Selected"	Options are Yes or No.	N/A
<b>Date Completed</b> <i>Required</i>	The day the determination was made.	N/A

## **Autism Spectrum Disorder**

Field	Description	
2a. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by all three of the following, currently or by history		
Deficits in social-emotional reciprocity	Options are Yes or No.	
Deficits in non-verbal communicative behaviors used for social interaction	Options are Yes or No.	
Deficits in developing, maintaining and understanding relationships	Options are Yes or No.	



Field	Description	
Social Communication Severity	Options include:  • Level 3 - Requiring very substantial support  • Level 2 - Requiring substantial support  • Level 1 - Requiring Support	
2b. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following, currently or by history		
Stereotyped or repetitive motor movements, use of objects, or speech	Options are Yes or No.	
Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior	Options are Yes or No.	
Highly restricted, fixated interests that are abnormal in intensity or focus	Options are Yes or No.	
Hyper-or hypoactivity to sensory input or unusual interest in sensory aspects of the environment	Options are Yes or No.	
Restricted, Repetitive Behavior Severity	Options include:  • Level 3 - Requiring very substantial support  • Level 2 - Requiring substantial support  • Level 1 - Requiring Support	
2c. And all of the characteristics below		
Symptoms must be present in the early developmental period but may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life; and	Options are Yes or No.	
Symptoms cause clinically significant impairment in social, occupational or other important areas of current functioning; and	Options are Yes or No.	



Field	Description
Symptoms are not primarily caused by a cognitive disability or developmental delay, and in order to make dual diagnoses of autism spectrum disorder and cognitive disability, social communication must be below that expected for the general developmental level	Options are Yes or No.

### **Cognitive Disability**

Students must meet both criteria below to qualify for cognitive disability.

Field	Description
General intellectual functioning 2 standard deviations or more below the mean as determined by the full-scale score on an individual cognitive evaluation, plus or minus standard error or measurement	Options are Yes or No.
Exhibits deficits in adaptive behavior and functioning and academic or preacademic skills as determined by an individual evaluation and manifested before age 18	Options are Yes or No.

#### **Deafness**

The only field in the Deafness section is a Yes or No dropdown called "An unaided hearing loss in excess of 70 decibels and precludes understanding of speech through the auditory mechanism, even with amplification, and demonstrates an inability in processing linguistic information through hearing even with amplification."

#### **Deaf-Blindness**

Students must meet both criteria below to qualify for deaf-blindness.

Field	Description
Causes such severe communication and	Options are Yes or No.
Other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness	Options are Yes or No.

### **Developmental Delay**



Field	Description	Validation
A student with a severe delay in development functions at a developmental level	<ul> <li>• two or more standard deviations below the mean in any one area of development specified in this section</li> <li>• 1.5 standard deviations below the mean in two or more areas of development</li> </ul>	Only one option can be selected.
Check the areas of develop	ment	
Adaptive Development	Options are Yes or No.	N/A
Adaptive Development Information	Any adaptive development comments.	This field is limited to 100 characters.
Cognitive Development	Options are Yes or No.	N/A
Cognitive Development Information	Any cognitive development comments.	This field is limited to 100 characters.
Communication Development	Options are Yes or No.	N/A
Communication Area	Options are:  • Receptive Language  • Expressive Language	Multiple options can be selected.
Communication Development Information	Any communication development comments.	This field is limited to 100 characters.
Social or Emotional Development	Options are Yes or No.	N/A
Social or Emotional  Development Information	Any social or emotional development comments.	This field is limited to 100 characters.
Physical Development	Options are Yes or No.	N/A
Physical Development Area	Options are:     Gross Motor     Fine Motor	Multiple options can be selected.
Physical Development Information	Any physical development comments.	This field is limited to 100 characters.



### **Emotional Disability**

Field	Description	
1. Emotional disability is a condition that exhibits one or more of the following characteristics to a marked degree over a long period of time Student must exhibit one or more characteristics to meet criteria		
An inability to learn which cannot be explained by intellectual, sensory or health factors	Options are Yes or No.	
An inability to build or maintain satisfactory interpersonal relationships with peers and teachers	Options are Yes or No.	
Inappropriate types of behavior or feelings under normal circumstances	Options are Yes or No.	
A general pervasive mood of unhappiness or depression	Options are Yes or No.	
A tendency to develop physical symptoms or fears associated with personal or school problems	Options are Yes or No.	
2. A student may be identified as emotional disability if the following requirements are met  Must meet all criteria		
The student demonstrates serious behavior problems over a long period of time, generally at least six months, with documentation from more than one source of the frequency and severity of the targeted behaviors	Options are Yes or No.	
The student's symptoms cause significant impairment in social, emotional, behavioral, occupational, or other areas	Options are Yes or No.	
An adverse effect on educational performance is verified through the full and individual evaluation procedures as provided in § 24:05:25:04	Options are Yes or No.	

### **Hearing Loss**

The only field in the Hearing Loss section is a Yes or No dropdown called "A student may be identified as having a hearing loss if an unaided hearing loss of 35 to 69 decibels is present that makes the acquisition of receptive and expressive language skills difficult with or without the help of amplification."

### **Orthopedic Impairment**

Field	Description
1. There must be evidence of the following Must meet all criteria	



Description
Description

Severely impaired motor functioning that adversely affects educational performance; and	Options are Yes or No.
Deficits in muscular or neuromuscular functioning that significantly limits the student's ability to move about, sit, or manipulate materials required for learning; and	Options are Yes or No.
Student's bone, joint, or muscle problems affect ambulation, posture, or gross and fine motor skills; and	Options are Yes or No.
Medical data by a qualified medical evaluator describes and confirms an orthopedic impairment	Options are Yes or No.

#### **Other Health Impaired**

The only field on the Other Health Impaired section is a Yes or No dropdown called "1. Other health impaired means having limited strength, vitality or alertness, including heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment is due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, attention deficit disorder or attention deficit hyperactivity disorder, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, Tourette syndrome, or diabetes."

#### **Specific Learning Disability**

Field	Description	Validation
1. Does the student achieve adequately for the student's age or to meet state- approved grade-level standards in one or more of the following areas, when provided with learning experiences and instruction appropriate for the student's age or state- approved grade-level standards		
Oral Expression	Options are Does or Does Not.	N/A
Listening Comprehension	Options are Does or Does Not.	N/A
Written Expression	Options are Does or Does Not.	N/A
Basic Reading Skills	Options are Does or Does Not.	N/A
Reading Fluency Skills	Options are Does or Does Not.	N/A
Reading Comprehension	Options are Does or Does Not.	N/A
Mathematics Calculation	Options are Does or Does Not.	N/A



Field	Description	Validation
Mathematics Reasoning	Options are Does or Does Not.	N/A
2. Please indicate which method the team will be using to determine SLD eligibility	Options include:  • Method A - Discrepancy  • Method B - Response to Intervention	N/A
The Following Sections (3-	8) Required only for Initial Eligibility	Determination
3. Document data that demonstrates that prior to, or as part of, the referral process, the student was provided appropriate instruction in regular education settings by qualified personnel	A description of how the student was provided appropriate instruction in a regular education setting.	This field is limited to 8000 characters.
4. Method A - Discrepancy Qualified Personnel		
Teacher *Required	The name of the qualified personnel.	*This field is available and required when Method B - Response to Intervention is selected from the "Please indicate which method the team will be using to determine SLD eligibility" field.  This field is limited to 150 characters.  This field is repeated four times.



Field	Description	Validation
Certified *Required	Options are Yes or No.	*This field is available and required when Method B - Response to Intervention is selected from the "Please indicate which method the team will be using to determine SLD eligibility" field.  This field is repeated four times.
Level of Certification	Options include:  • Tier I  • Tier II  • Tier III	*This field is available and required when Yes is selected from the Certified field.  This field is repeated four times.
5. Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of student progress during instruction, which was provided to the student's parents	A description of the documentation of assessments of the student's achievement provided to their parent/guardian.	This field is limited to 8000 characters.

## 6. Method A - Discrepancy Nothing Needed

Method B - Response to Intervention Intervention Data \*Attached information if needed

The following columns display in the table. Click **Add** to add a record to the table in-line.

- Week #
- Date
- Score

#### 7. Attendance Record



Field	Description	Validation
School Year	The school year.	This field is limited to 9 characters. There are two instances of this field.
Total Days of School	The number of school days.	This field is limited to 6 characters. There are two instances of this field.
Totals Days in Attendance	The number of days the student attended.	This field is limited to 6 characters. There are two instances of this field.
Days Absent Quarter 1	The number of days the student was absent in quarter 1.	This field is limited to 6 characters. There are two instances of this field.
Days Absent Quarter 2	The number of days the student was absent in quarter 2.	This field is limited to 6 characters. There are two instances of this field.
Days Absent Quarter 3	The number of days the student was absent in quarter 3.	This field is limited to 6 characters. There are two instances of this field.
Days Absent Quarter 4	The number of days the student was absent in quarter 4.	This field is limited to 6 characters. There are two instances of this field.
8. A student may not be determined to be a student with a disability if the determinant factor is a lack of appropriate instruction		
Is the underachievement of the student due to lack of instruction in		
Reading	Options are Yes or No.	N/A
Math	Options are Yes or No.	N/A
The Following Sections Required for All Eligibility Determination		



Field	Description	Validation
9. Indicate which method the team will be using to determine SLD eligibility	Options include:  • Method A - Discrepancy  • Method B - Response to Intervention	N/A
Observer	The name of the observer.	This field is limited to 150 characters.
Observation Date	The day of observation.	N/A
<b>Observation Notes</b>	Any comments related to the observation.	This field is limited to 8000 characters.
10. Document educationally relevant medical findings	Any medical findings.	This field is limited to 8000 characters.
11. The evaluation team d is/is not primarily the resu	etermines that the student's achiever llt of	ment level problem
Visual, hearing or motor disabilities	Options include:  • Is • Is Not	N/A
Cognitive Disability	Options include:  • Is • Is Not	N/A
Emotional Disability	Options include:  Is Is Not	N/A
Cultural factors	Options include:  • Is • Is Not	N/A
Environmental or economic disadvantage	Options include:  • Is • Is Not	N/A
Limited English proficiency	Options include:  • Is • Is Not	N/A



Field Description	Validation
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This Section should only be completed if using a state-approved Response to Intervention model AND Rtl criteria will be used to determine eligibility

#### 12. Method B Response to Intervention

If the student has participated in a process that assesses the student's response to scientific, research-based intervention document the following

Questions in this section are available when Method B - Response to Intervention is selected from the "Please indicate which method the team will be using to determine SLD eligibility" field.

The instructional strategies used in the RTI process that assesses the student's response to scientific, research-based intervention	The instructional strategies of the RTI process.	This field is limited to 8000 characters.
Number of weeks the student has participated in Tier 3 interventions	The number of weeks the student participated in a tier 3 intervention.	This field is limited to 5 characters.
Number of minutes of core reading instruction	The number of minutes the student spent in core reading instruction.	This field is limited to 5 characters.
Number of minutes of intensive, individualized intervention	The number of minutes the student had intensive, individualized intervention.	This field is limited to 5 characters.
Frequency of the intervention	The frequency of the intervention.	N/A

#### Research-based intervention strategies

#### Please list by type, not name

The following columns display. Click the **Add** button to add a record in-line.

- Name of Research-Based Intervention Strategy
- Duration of the Intervention

Fall Universal Screening Score	The student's universal screening score for the fall.	N/A
Winter Universal Screening Score	The student's universal screening score for the winter.	N/A



Field	Description	Validation
Actual rate of progress compared to benchmark standard	The student's actual rate of progress.	This field is limited to 150 characters.
Grade level benchmark standard for end of school year	The benchmark standard for the end of the school year.	This field is limited to 150 characters.
<b>Desired Rate of Progress</b>	The desired rate of progress.	This field is limited to 150 characters.
Predicted Rate of Progress	The predicted rate of progress.	This field is limited to 150 characters.
Is the Predicted Rate of Progress significantly below grade level expectations	Options are Yes or No.	N/A
Team Conclusions		
First Name Required	The team member's first name.	N/A
Last Name Required	The team member's last name.	N/A
Role	The team member's role.	N/A
Agree or Disagree	Indicates the team member agrees or disagrees with the evaluation.	N/A

## **Speech/Language Impairments**

Field	Description
Articulation Disorders	
Performance on a standardized articulation test falls two standard deviations below the mean and intelligibility is affected in conversation	Options are Yes or No.
Test performance is less than two standard deviations below the mean, but the student is judged unintelligible by the speech and language clinician and one other adult	Options are Yes or No.



Field	Description	
Performance on a phonological assessment falls in the profound or severe range and intelligibility is affected in conversation	Options are Yes or No.	
Performance on a phonological assessment falls in the moderate range, intelligibility is affected in conversation and during a tracking period of between three and six months there was a lack of improvement in the number and type of errors	Options are Yes or No.	
An error persists six months to one year beyond the chronological age when 90 percent of students have typically acquired the sound based on developmental articulation norms	Options are Yes or No.	
Fluency Disorder		
The student consistently exhibits one or more of the following symptomatic behaviors of dysfluency	Options are Yes or No.	
**Nequired**  **Required**  **Temperature*  **	Options include:              Sound, syllable, or word repetition             Prolongations of sounds, syllables, or words             Blockages             Hesitations  *This field is available and required when Yes is selected from the "The student consistently exhibits one or more of the following symptomatic behaviors of dysfluency" field.	
There is a significant discrepancy from the norm a measured by speech sampling in a variety of contexts  A significant discrepancy from the norm is five dysfluencies a minute	Options are Yes or No.	
OR The disruption occurs to the degree that the individual or persons who listen to the individual react to the manner of speech and the disruptions in a way that impedes communication	Options are Yes or No.	



Field	Description	
Voice Disorder		
Consistent deviations exist in one or more of the parameters of voice: pitch, quality, or volume	Options are Yes or No.	
The voice is discrepant from the norm for age, gender, or culture and is distracting to the listener	Options are Yes or No.	
The disorder is not the result of a temporary problem, such as normal voice changes, allergies, colds, or similar conditions	Options are Yes or No.	
Language Disorder		
Through age eight, performance falls 1.5 standard deviations below the mean on standardized evaluation instruments; beginning at age nine, a difference is present on 1.5 standard deviations between performance on an individually administered standardized language assessment instrument and measured expected potential as measured by an individually administered intelligence test	Options are Yes or No.	
The student's pragmatic skills, as measured by checklists, language samples, or observation, adversely affect the student's academic and social interactions	Options are Yes or No.	

#### **Traumatic Brain Injury**

The only field on the Traumatic Brain Injury section is a Yes or No dropdown called "Such as cognition; language; memory; attention; reasoning; abstract thinking; judgement; problem solving; sensory; perceptual; and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma."

#### **Vision Loss**

Field	Description
1. Partial sight is one or more deficiencies in visual acuity, as follows	Options are Yes or No.



Field	Description
Deficiencies in visual acuity	<ul> <li>Options are:</li> <li>Visual acuity of not better than 20/70 in the better eye after correction</li> <li>Restricted visual field</li> <li>Limited ability to move about safely in the environment due to a visual disability</li> </ul>
2. Blindness - Visual acuity of 20/200 or less in the better eye with correcting lenses or a limited field of vision such that the widest diameter subtends an angular distance of no greater than 20 degrees or has a medically indicated expectation of visual deterioration	Options are Yes or No.