

FRYSC Corps Teacher Referral Form

Name of Teacher	
School	
Date of Referral	
Name of Student	
Grade	
Current Reading Level	
Current Math Level	
Other subject score	

Why are you referring this student to the tutor?

What specific reading areas should be addressed with this student?

Letter Awareness	<input type="checkbox"/>	Comments
Sound Awareness	<input type="checkbox"/>	
Phonemes	<input type="checkbox"/>	
Fluency	<input type="checkbox"/>	
Comprehension	<input type="checkbox"/>	
Vocabulary	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

Please assess the student's performance in the following areas

	<i>Excellent</i>	<i>Good</i>	<i>Neutral</i>	<i>Poor</i>	<i>Very Poor</i>	<i>Comment</i>
motivation and enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
homework completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
homework quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
class work completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
classwork quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
classroom behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
social skills with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
social skills with adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ability to focus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Is there anything else you would like to tell us about this student?