Students Strengths and Areas of Need

Directions: The following page is to be completed separately by a parent/guardian and learning specialist/special education teacher. Please provide narrative information in the following domains. When appropriate, provide grade level equivalency. Please provide as much information as you see fit, to the best of your ability. If there is a domain where there is no data to share, please write N/A.

Functional Academics: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: basic reading, writing and math, and other academic skills needed for daily, independent functioning, including telling time, measurement, writing notes and letters, etc.

Communication: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: speech, language, and listening skills needed for communication with other people, including vocabulary, responding to questions, conversation skills, etc.

Social: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: skills needed to interact socially and get along with other people, including having friends, showing and recognizing emotions, assisting others, overall attitude and behavior, and using manners.

Self- Direction: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: skills needed for independence, responsibility, and self-control, including starting and completing tasks, keeping a schedule, following time limits, following directions, making choices, etc.

Self-care: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: skills needed for personal care including eating, dressing, bathing, toileting, grooming, hygiene, etc.

Health and safety: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: skills needed for protection of health and to respond to illness and injury, including following safety rules, using medicines, showing caution, etc.

Motor Skills: Please provide narrative feedback and information regarding the student's areas of strength and/or areas of need in the following areas: fine and gross motor development.

Eligibility Information

Directions: Please upload the following documentation to ensure your student meets our eligibility requirements for acceptance into our RAMS Program. Please note that all applicants admitted to the RAMS Program will graduate with a Modified High School Diploma. Evidence supporting the decision to place a student on a Modified High School Diploma must be provided to ensure the student has:

- 1. A documented history of the student's inability to maintain grade level achievement due to learning and instructional barriers.
- 2. A documented history of a medical condition that creates a barrier to achievement.

Most Recent IEP or ILP (current school year IEP or ILP ONLY)

Psychoeducational evaluation within three years

Current Transcript, Progress Report, or Report Card (current school year ONLY)

Other relevant medical information or other educational reports such as speech and language or orientation and mobility, etc.

Goals and Student Interests

Directions: With the support of a parent/guardian or teacher, please have the student provide feedback in the following areas using complete sentences or bullet-form. Responses can be typed by the student, parent/guardian or teacher, but should represent the student applying. Support can be provided to the student.

- 1. What are your academic goals for high school?
- 2. What are your goals for growing in your independence to one day live by yourself or with others in your community?
- 3. When you graduate from high school, what kind of job would you like to have?
- 4. What are some things you like to do with your friends and family?
- 5. What are some things you do not like to do with your friends and family?
- 6. Do you play any sports or are you interested in any clubs?

- 7. Is there anything you feel we should know about you that would help us to understand how to support you best?
- 8. Why do you want to go to Central Catholic?