

Extended School Services  
Student Referral and Projected Goals

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Referring Teacher: \_\_\_\_\_ Date of Entry: \_\_\_\_\_

Reason for Referral:

- \_\_\_\_\_ In danger of falling behind in key subject matter
- \_\_\_\_\_ doesn't understand concepts/skills in subject area
- \_\_\_\_\_ needs more time to complete work
- \_\_\_\_\_ needs additional time to learn skill/concept
- \_\_\_\_\_ at risk of failing to graduate on time
- \_\_\_\_\_ other \_\_\_\_\_

Helpful Hints in working with student: (learning style, physical/behavior characteristics, special interests, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Goals: Academic Expectations

Academic Area	Present Grade	Target Grade
Reading		
Writing		
Math		
Science		
Social Studies		
Arts and Humanities		
Other: _____		
Non-Cognitive Goals		

Academic Expectation Goals: (State priority academic goals in measurable terms)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Non-Cognitive goals: (Ex. Attendance, motivation, self-image independence, ability to work with others, etc.)

4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_