Student Academic Needs Form

Directions: Fill out this form to the best of your ability and submit it to the principal for review.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Academic concerns as observed by the teacher:  |
| Data to show academic concerns:  |
| Accommodations already made for the student (highlight or circle all that apply) Changed seating Adjusted pacing Adjusted current curriculum Tried different curriculum: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Added small group tutoring Added one-on-one time in classAdded one-on-one time with a different teacherIdentified the student’s learning style Added technology-based activitiesAdded hands-on activities Added music-based activities Added art-based activities Added movement-based activitiesOther:  |
| Have you contacted the parent regarding these academic concerns? YES NO |
| What would you like me (the principal) to do next? (highlight or circle all that apply)Schedule a parent meeting Write up an SLP Suggest additional testing to the parent Add the student to Jessica’s brain programObtain a laptop for the student to type Update / install additional apps that may be helpfulObtain a voice recorder for the student to record ideas before writingCheck the student’s IEP or 504 for additional info Watch you (teacher) teach to give better advice Find professional development for you (teacher) to take Other:  |