

Student's Name _____ Date _____

STEP ~ ESU #15 Alternative Education Program ~ Student Academic Assessment Form

This Form is for ESU #15 Alternative Education Program – to be filled out by the prospective student's school.

Guidance Counselor _____

1. Academic referral

- Areas of difficulty _____

- Alternative strategies tried _____

2. Academic history

	<u>Credits Earned</u>	<u>Credits Required</u>	<u>Credits Needed</u>
English	_____	_____	_____
Social Studies	_____	_____	_____
Math	_____	_____	_____
Science	_____	_____	_____
Electives	_____	_____	_____

3. Schools and other institutions attended _____

4. Include standardized test scores and attendance records _____

5. Complete the following only if the school is not the one making the referral.
Evaluate the student at the time of referral. Write one number for each behavior.

0=Never 1=Seldom 2=Sometimes 3=Usually 4=Always

____ Displays courteous behavior towards others

____ Cooperates with others

____ Appearance is neat and clean

____ Does what he/she is told without being told more than once

____ Uses appropriate language

____ Displays a positive attitude

____ Accepts constructive criticism

____ Respects the property of others

Please include any other information that is relevant to this referral below:

