

BEHAVIOR SPECIALIST REFERRAL FORM

The Behavior Specialist is under direction of the Director of Special Education, and is responsible for the behavioral assessment of students, generating and implementing behavioral plans to remediate behavioral and social problems for students in general or special education programs. She/he is also available for consultation to school personnel and parents of these students. The role of the behavior specialist is to facilitate, assess and support instructional programs for students in general and special education; provide training and work collaboratively with teachers, aides and support staffs to demonstrate best practices, strategies and techniques to enhance instruction for students with social, communication, behavioral and learning challenges; provide preventative classroom lessons which include but not limited to bullying prevention, problem solving, self esteem, developing social skills, etc; and do other related work as required. The Behavior Specialist will work with individuals, parents or small groups. The Behavior Specialist will help to design a three tier behavioral intervention model appropriate to Elementary students.

Name _____ Parent/Guardian _____
Address _____ School _____
Telephone _____ Referring Teacher _____
Current Grade _____ D.O.B. _____ Date of Referral _____

Behavior Checklist:

- | | |
|---|--|
| _____ Easily frustrated | _____ Reluctant to speak in class |
| _____ Destructive | _____ Easily fatigues |
| _____ Fights; aggressive | _____ Physically active/impulsive |
| _____ Fearful & anxious | _____ Inappropriate remarks |
| _____ Unhappy (rarely smiles) | _____ Needs frequent reassurance |
| _____ Poor personal hygiene | _____ Abuses property |
| _____ Appears to dislike school | _____ Scapegoated by others |
| _____ Unable to anticipate consequences | _____ Inappropriate reaction to poor performance |
| _____ Not accepted by peers | _____ Will not accept responsibility for own actions |
| _____ Distractible | _____ Misinterprets simple statements |
| _____ Poor self-image | _____ Defiant |
| _____ Absence or truancy | _____ Argumentative |
| _____ Teases or provokes others | |

Academic Checklist: Check only if item is of major concern

- | | |
|--|---|
| _____ Unable to organize work on paper | _____ Does not turn in assignments |
| _____ Does not come to class prepared | _____ Unable to complete multiple assignments |
| _____ Does not work independently | _____ Slow in finishing work |
| _____ Does not complete assignments | |

Environmental Factors:

- _____ Successive relocations
_____ Recent break-up in family (divorce, separation, etc.)
_____ Recent death in family
_____ Other

Briefly state the reason for referral:

Principal's Signature _____ Date _____

Parent Signature _____ Date _____