



Augustine Literacy Project® Program Teacher Referral Form

We serve low-income students who struggle with reading or written language. Most students are of average or above average intelligence with the potential to succeed. Our students are not: ESL students new to spoken English; students with behavioral issues (beyond the scope of a volunteer); students who attend school sporadically; students already being served successfully through EC classrooms.

School/Teacher/Grade _____ Referral Date: _____

Teacher Email: _____@wsfcs.k12.nc.us Phone: _____

Student: _____ Student (Lunch) Number: _____

Gender? M F IEP? Yes No # Absences Previous School Year? _____

In what areas of reading/written language is the student having difficulties:

_____ Spelling _____ Fluency _____ Handwriting Other ? _____

	YES	NO
Is the student receiving other services/tutoring? If so, what services are they receiving?	<input type="checkbox"/>	<input type="checkbox"/>
Does the student qualify for free or reduced lunch?	<input type="checkbox"/>	<input type="checkbox"/>
Is student reading at least 1 grade level below placement?	<input type="checkbox"/>	<input type="checkbox"/>
Is the student average or above average intelligence?	<input type="checkbox"/>	<input type="checkbox"/>
Is the student fluent in spoken English?	<input type="checkbox"/>	<input type="checkbox"/>
Does this child come to school regularly?	<input type="checkbox"/>	<input type="checkbox"/>

Does this child have any allergies? (Ex. peanut, wheat, etc . . .) _____

Please list the Days and Times when a tutor can work with this child.

(Must be at least 45-60 minutes two times per week.)

Day/Time	Day/Time
_____	_____

Please list other pull-outs (speech, etc.) and days/times.

Pull-out/Day/ Time	Pull-Out/Day/Time
_____	_____

Please briefly describe this child's personality/behavior or any issues we should know about.

(Ex. shy, rowdy, hyperactive, insecure, etc.) Use back, if needed.

**PLEASE RETURN FORM WITH THE STUDENT'S "DIBELS NEXT" REPORT TO KRIS COX
AT MOORE MAGNET VIA SCHOOL COURIER OR AT ADDRESS BELOW.**