

Family Learning Institute

Educational Information

All information below is for use by FLI staff only

Student's Name _____

Student's School _____ Grade _____

Current Text Level (Balanced Literacy) _____

Student's Teachers (*fill out all that apply*):

Classroom _____ Math _____

Reading _____ Special Ed _____

1. What is the student's current grade level in **reading**? _____ **Math?** _____

2. What are your observations regarding the student? _____

3. Does the student have a specific area of disability? (If more than one, please list all) _____

4. Does the student receive special services at school (e.g. Special Ed, ESL, Title 1, counseling)? _____

5. Is there a current IEP on this student? _____

6. Is there anything else of which FLI should be aware? _____

THANK YOU for your support