

Cohort Site TCID Name

Preliminary Questions DOB Race

Is This Child the Sibling of a Target Child? [Enter y for yes and n for no]

Does the youth have a school record?

Is the school record complete?

Academic Year

Collection Date

Youth's Grade [Enter the grade then press the Enter key]

Is the youth repeating a grade in the current year? [Enter y for yes and n for no]

Number of school building transitions since the end of last school year [Enter the number of transitions, then press the Enter key]

How many schools did the youth attend during this academic year? [Enter the number of schools then press the Enter key]

School Questions (First School)

What type of school did the child attend this past school year?

Select the Name of the School

[Begin typing the first few letters of the school. When the correct school appears in the 'Select the Name of the School' box above, left click on the down arrow and then single click the choice.]

Course Grades

Math

Language Arts

Social Studies

Science

School Attendance [Enter the number of days then press the Enter key]

Number of days absent

Number of days tardy

Number of days enrolled





School Questions (Second School)

What type of school did the child attend this past school year? [dropdown]

Select the Name of the School [dropdown]

[Begin typing the first few letters of the school. When the correct school appears in the 'Select the Name of the School' box above, left click on the down arrow and then single click the choice.]

Course Grades

Math [dropdown]

Language Arts [dropdown]

Social Studies [dropdown]

Science [dropdown]

School Attendance

[Enter the number of days then press the Enter key]

Number of days absent [input]

Number of days tardy [input]

Number of days enrolled [input]



School Questions (Third School)

What type of school did the child attend this past school year? [dropdown]

Select the Name of the School [dropdown]

[Begin typing the first few letters of the school. When the correct school appears in the 'Select the Name of the School' box above, left click on the down arrow and then single click the choice.]

Course Grades

Math [dropdown]

Language Arts [dropdown]

Social Studies [dropdown]

Science [dropdown]

School Attendance

[Enter the number of days then press the Enter key]

Number of days absent [input]

Number of days tardy [input]

Number of days enrolled [input]



Durham's Achievement/Competency Exams

Name of achievement test used

[For each item, enter the score then press the Enter key]

Scale Score Achievement Level State Percentile Score

Reading: [input] [input] [input]

Math: [input] [input] [input]

Total Percentile Scores:

Language: [input]

Math: [input]

Does the child have a current IEP? [input] [Enter y for yes and n for no]





Nashville's Achievement/Competency Exams

Name of achievement test used \_\_\_\_\_

[For each item, enter the score then press the Enter key]

Total Percentile Scores:

Language: \_\_\_\_\_
Math: \_\_\_\_\_
Reading: \_\_\_\_\_

Tennessee Competency Exam:

1. Date taken: [MM/DD/YYYY] 2. Date taken: [MM/DD/YYYY]
Math score: \_\_\_\_\_ Math score: \_\_\_\_\_
Language score: \_\_\_\_\_ Language score: \_\_\_\_\_

Tennessee Gateway Exams:

Algebra I score: \_\_\_\_\_ Date taken: [MM/DD/YYYY]
Biology I score: \_\_\_\_\_ Date taken: [MM/DD/YYYY]
English II score: \_\_\_\_\_ Date taken: [MM/DD/YYYY]

Does the child have a current IEP? \_\_\_\_\_ [Enter y for yes and n for no]



Penn State's Achievement/Competency Exams

Name of achievement test used \_\_\_\_\_

[For each item, enter the score then press the Enter key]

Total Percentile Scores:

PSSA:

Language: \_\_\_\_\_

Reading: \_\_\_\_\_

Math: \_\_\_\_\_

Language: \_\_\_\_\_

Math: \_\_\_\_\_

Does the child have a current IEP? \_\_\_\_\_ [Enter y for yes and n for no]



Seattle's Achievement/Competency Exams

Name of achievement test used

[For each item, enter the score then press the Enter key]

Total Percentile Scores:

WASL:

Language:

Reading:

Math:

Writing:

Math:

Does the child have a current IEP? [Enter y for yes and n for no]





Current Disability/Classification [Check all that apply]

- Mentally Retarded (MR) 74
- Learning Disabled (LD) 75
- Severely Behaviorally Disordered (SBD) 76  
Severely Emotionally Disordered (SED)  
Behaviorally/Emotionally Handicapped (BEH)
- Orthopedically Impaired (OI) 77
- Other Health Impaired (OHI) 78  
like ADHD, Epilepsy, Brain Impairment
- Speech/Language Impaired (SLI) 79
- Talented and Gifted (TAG) 80
- Current Disability/Classificaton Missing 81

Date of most recent IEP [Enter MONTH, DAY & YEAR Using two-digit numbers for the MONTH and DAY and four digits for the YEAR] 82

Current Level of Service [USE MARK'S FORMULA FOR CALCULATING THE NUMBER OF MINUTES PER WEEK.]

Regular Ed or Special Ed Resource [Enter the number of minutes then press the Enter key] 83

Separate or Self-Contained [Enter the number of minutes then press the Enter key] 84

Consultation/Counseling [Enter the number of minutes then press the Enter key] 85

Total Number of Minutes Per Week with Services 86

Has the child been declared to no longer require special education services? 87 [Enter y for yes or n for no]



Exit View Records Resume Data Collec Edit Form Help Save Contents Select Name

Did the TY take the ACT, PSAT or SAT? \_\_\_\_\_   
[Enter n for no, a for ACT, p for PSAT or s for SAT]

ACT Score \_\_\_\_\_   
[Enter the score then press the Enter key]

PSAT/SAT Score \_\_\_\_\_   
[Enter the combined score then press the Enter key]