

Student Support Checklist

Name _____ Grade _____ Teacher _____

Date of initial contact _____

Order	Item	Responsible	Date Completed
1	Observations (whole, small, 1:1)	Teacher	
2	Notify Division Principal	Teacher	
3	Contact ASP Director	Teacher	
4	Observation by ASP	ASP Team Member	
5	Post Observation Meeting with Teacher	ASP Team Member	
6	Meeting with Parents	ASP Team Member	
7	Psychoeducational Evaluation Recommended	ASP Team Member	
8	Psychoeducational Testing Received	Parent	
9	Testing Reviewed	ASP Team Member	
10	Accommodations Form Created	ASP Team Member	
11	Accommodation Meeting with ASP and Classroom Teacher	ASP Team Member	
12	Recommended Accommodations Form Shared with Parents	ASP Team Member	
13	Accommodation Form signed by all Stakeholders	ASP Team Member	
14	Check in 1 month	ASP Team Member	
15	Check in 2 months	ASP Team Member	
16	Meeting with ASP and Classroom Teacher at 3 months	ASP Team Member	