|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CITY SCHOOL DISTRICT OF ALBANY  **FBA RECORDS REVIEW FORM**  2017-2018 | | | | | | | | | |
| STUDENT:       DOB:       FORM COMPLETED BY:       DATE COMPLETED: | | | | | | | | | |
| SOURCE | | | TYPE OF INFORMATION/SUMMARY | | | | | | DATE COMPLETED |
| **RECORDS REVIEWED** | | | Educational History / grades  Attendance  Discipline Records  Medical History  Previous FBA – BIP – or interventions  Classroom logs / data  Other: | | | | | |  |
| **Discipline Records** | | | Number of referrals:       Days in ISS:       OSS:  Comments: | | | | | |  |
| **Previous Educational Information / Teacher Notes** | | | | | | | | | |
| **School/ Year:**  **Grade:**  **Teacher:** | | |  | | | | | |  |
| **School/ Year:**  **Grade:**  **Teacher:** | | |  | | | | | |  |
| NYS TEST SCORES | | | Year | Grade | READING | MATH | |  |  |
| 2016-17 |  |  |  | |
| 2015-16 |  |  |  | |
| 2014-15 |  |  |  | |
| Attendance 2017-18 TO DATE  Previous Year Attendance Issues? | | | Absences:       Tardies:  Yes  No  Comment: | | | | | |  |
| **Is student currently receiving services:** | | | **COMMENTS:** | | | | GRADES  REPORTING PERIOD:    ELA:  MATH:  SCIENCE:  SOCIAL STUDIES :  ELECTIVE:  ELECTIVE:  ELECTIVE:  PE:  COMMENTS: | |  |
|  | Yes | No |
| SPED: |  |  |
| Related Services: (specify) |  |  |
| 504: |  |  |
| ESL: |  |  |
| IST: |  |  |
| Specialized Class:  Reading |  |  |
| Math |  |  |
| Alternate Placement:  Where? |  |  |