Sacramento City Unified School District

School Name

**SST Request Form**

This form is the first step in the SST request process. All fields on both sides of this form must be completed before an SST date is scheduled.

**I. Basic Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Student: | Student Name | ID #: |       |
| Grade: |  | Gender: |  |
| Primary Lang: |       | Home Lang: |       |
|  |  |  |  |

Is the student currently identified as, or receiving any of the following (check all that apply):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  Foster Youth | [ ]  Homeless | [ ]  Bilingual Ed | [ ]  Counseling | [ ]  Sp Ed |

**II. Student Strengths**

Type student strengths here

**III. Specific Concerns**

Type student concerns here

**IV. Communication**

Please list details about communication with parent(s), other teachers or support staff regarding these issues/concerns:

Type communication details here

**V. Attendance and Behavior**

Attendance:

|  |  |  |  |
| --- | --- | --- | --- |
| Days Enrolled: |       | Days Present: |       |
| Excused Absences: |       | Unexcused Absences: |       |
| Tardies: |       |  |  |

Behavior Regularly Displayed:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  Aggression | [ ]  Crying | [ ]  Fearfulness | [ ]  Insecurity | [ ]  Stealing |
| [ ]  Anxiety | [ ]  Defiance | [ ]  Foul Language | [ ]  Lying | [ ]  Tries Hard |
| [ ]  Apathy | [ ]  Dependability | [ ]  Frustration | [ ]  Moodiness | [ ]  Withdrawal |
| [ ]  Cheerfulness | [ ]  Explosiveness | [ ]  Hyperactivity | [ ]  Nail Biting | [ ]  Other: |
| [ ]  Cooperation | [ ]  Facial Tics | [ ]  Indifference | [ ]  Showing Off |  |
|  |  |  |  |  |

**VI. Academic Data**

List most recent scores (where applicable):

|  |  |
| --- | --- |
|  | Classroom Assessments |
| SBAC: ELA | SBAC: Math | BMK: ELA | BMK: Math | Math | Reading | Writing |
|       |       |       |       |       |       |       |

**VII. Current/Past Interventions**

Please check all current and/or past interventions attempted with student, and list result:

|  |  |
| --- | --- |
| Environment | Teaching Techniques |
| Intervention | Outcome | Intervention | Outcome |
| [ ]  Clarify rules[ ]  Change seating[ ]  Reduce distractions[ ]  Change class activities[ ]  Change groups[ ]  Increased physical space[ ]  Special quiet/time-out area[ ]  Modify schedule[ ]  Add structure |  | [ ]  Vary voice volume[ ]  Use hand on shoulder contact[ ]  Reduce stimulation[ ]  Teacher circulates around room[ ]  Repeat instruction same way[ ]  Designate activities[ ]  Use behavior modification[ ]  Use visual aids |  |

|  |  |
| --- | --- |
| Activities | Miscellaneous |
| Intervention | Outcome | Intervention | Outcome |
| [ ]  Simplify[ ]  Shorten[ ]  Individual contracts[ ]  Buddy system[ ]  Notebooks for assignments[ ]  Alt assignment structure[ ]  Use of tape recorder |  | [ ]  Review cum folder[ ]  Keep work samples[ ]  Assessment results [ ]  Parent contact[ ]  Referral to counselor[ ]  Referral to office[ ]  Referral to (specify): |  |

|  |  |
| --- | --- |
| Instruction Program | Materials |
| Intervention | Outcome | Intervention | Outcome |
| [ ]  Cooperative learning[ ]  Individualized instruction[ ]  Health awareness[ ]  Guidance lesson[ ]  Small group[ ]  Other (specify): |  | [ ] Use varied materials[ ]  Tapes[ ]  Soft music[ ]  Play activities[ ]  Computer[ ]  Books/stories |  |

Completed by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Teacher / Staff Signature Date