**Discovery Center Referral Form**

**Middle School**

**Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Initial**

\_\_\_\_\_ \_\_\_\_\_ Teacher becomes aware of areas of persistent difficulty and checks student record.

**Within 5 school days, teacher completes the following:**

**\_\_\_\_\_ \_\_\_\_\_** speaks with student’s former teachers;

\_\_\_\_\_ \_\_\_\_\_ contacts parents regarding concerns: records date, person contacted, and how contacted;

\_\_\_\_\_ \_\_\_\_\_ contacts Director of Student Services (DSS) with concerns.

**Within 10 school days of teacher notification regarding student difficulty, the Director of Student Services (DSS) completes the following:**

\_\_\_\_\_ \_\_\_\_\_ notifies appropriate principal;

\_\_\_\_\_ \_\_\_\_\_ refers all relevant personnel to online *Teacher Checklist Form* for completion and

Return to DSS **within 5 school days;**

\_\_\_\_\_ \_\_\_\_\_ checks student files (Academic, Discovery, Health) for helpful information and

documents concerns;

\_\_\_\_\_ \_\_\_\_\_ observes student;

\_\_\_\_\_ \_\_\_\_\_ contacts parents for permission to administer preliminary Informal Testing;

\_\_\_\_\_ \_\_\_\_\_ initiates preliminary Informal Testing.

**Within 5 school days of Informal Testing, DSS completes the following:**

**\_\_\_\_\_ \_\_\_\_\_** meets with parents and teacher(s) regarding findings and makes recommendations;

(Use Parent Interview Form to gather information.)

* gives *Application for Testing* and *Parent Checklist*
* *suggests parents acquire doctor’s note for health disability (ADHD, vision, etc.)*

\_\_\_\_\_ \_\_\_\_\_ initiates psychoeducational testing process.

(cont.)

**Within 15 days after receiving psychoeducational test results, DSS completes the following:**

\_\_\_\_\_ \_\_\_\_\_ meets with parents, teachers, and evaluators to review psychoeducational test reports;

* makes recommendations as to how PVCA can best meet the student’s needs;

\_\_\_\_\_ \_\_\_\_\_ enrolls student in one of Discovery programs, if necessary.

**Within 5 school days of team meeting, DSS will:**

\_\_\_\_\_ \_\_\_\_\_ produce Accommodation Form/504 and submit to all pertinent personnel.

**Annually, DSS will oversee re-evaluation and update of Accommodations/504.**

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

**Date Initial Date Initial Date Initial Date Initial**

DC Ref. Form MS p. 2