

**Educational Service Unit #1
Initial SAT Meeting Log**

Student: _____	Referral Source: _____
Age/Grade: _____	Date of Meeting: _____
Parents: _____	Parents Attended? Yes No
Those in Attendance:	
_____	_____
_____	_____
_____	_____
_____	_____

Areas of Strength: _____

Areas of Concern: _____

<i>Circle Probe:</i>	Universal Screening Data			<i>At-risk?</i>	DIBELS Data:	Progress Monitoring	At-risk?		
	<i>Recent Score</i>	<i>Previous Scores</i>	<i>Class Means</i>				Yes	No	Yes
RF/SF/LN:	_____	_____	_____	Yes	No	ORF:	_____	Yes	No
Math/NF:	_____	_____	_____	Yes	No	PSF:	_____	Yes	No
RC:	_____	_____	_____	Yes	No	NWF:	_____	Yes	No
CWS/CLS:	_____	_____	_____	Yes	No	ISF:	_____	Yes	No
						LNF:	_____	Yes	No

RF=Reading Fluency, SF=Sound Fluency, LN=Letter Naming, NF=Number Fluency, RC=Reading Comprehension CWS=Correct Writing Sequence, CLS=Correct Letter Sequence, ORF=Oral Reading Fluency, PSF=Phoneme Segmentation Fluency, Nonsense Word Fluency, ISF=Initial Sound Fluency, LNF=Letter Naming Fluency

Plan of Action

Target Area 1: _____

Intervention: _____

_____ *Person Responsible*

Data Collection Method: _____ *Person Responsible*

Goal: _____ *Number of weeks*
See handout: Student Goals for SAT for assistance in setting

Target Area 2: _____

Intervention: _____

_____ *Person Responsible*

Data Collection Method: _____ *Person Responsible*

Goal: _____ *Number of weeks*
See handout: Student Goals for SAT for assistance in setting

Assigned Case Manager: _____

Date of Follow-Up Meeting: _____

Mark Status on a Continuum:

