

**Handout C**  
**Educational Assessment: Parts A and B**

School District Name:  
School District Address:

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**Educational Assessment: Part A**

603 CMR 28.04(2)(a)(2)

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Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

School Personnel & Role: \_\_\_\_\_ Date: \_\_\_\_\_

**SCHOOL HISTORY:**

1.            YEAR                      GRADE                                      SCHOOL

2. Has the student received any instructional support services?    NO     YES If **YES**, please explain.

3. Have there been any school-related events/issues (such as attendance, recognitions, special education referrals, behavioral issues and medical problems) that have impacted upon the student's learning?    NO     YES If **YES**, please explain.

**EDUCATIONAL PROGRESS AND POTENTIAL:**

4. Is the student making progress in the general curriculum?    YES     NO If **NO**, explain why not and reference the student's educational history and state/district-wide assessment results when responding.

5. Has the student's progress been:  
a. similar to that of his/her peers?    YES     NO If **NO**, list the possible factors that have enhanced/ limited progress.

b. consistent over the student's school history?    YES     NO If **NO**, list the possible factors that have enhanced or limited progress.

6. Provide any other comments related to the student's educational and developmental potential.

