

School Letterhead

AP 207-3 School Based Team Notes on Referral

Student Name: _____	Date of SBT discussion: _____
Birthdate: _____	Note Taker: _____

What are the student's strengths, talents, likes or interests?

1. _____
2. _____
3. _____

1. Challenge #1 (from referral)

2. Discussion, data, attendance

3. Brainstorm of strategies which could be implemented

4. Action plan for Challenge #1

- a. Strategy to be used: _____
- b. Strategy to be used: _____
- c. Who will be responsible for implementing the strategy/intervention? _____
- d. When and where will the strategies/interventions be implemented? _____

- e. Who will monitor progress? _____
- f. How will progress be monitored? _____

- g. Date for SBT follow-up in 6-8 weeks. _____

1. Challenge #2 (from referral)

2. Discussion, data, attendance

3. Brainstorm of strategies which could be implemented

4. Action plan for Challenge #1

- a. Strategy to be used: _____
- b. Strategy to be used: _____
- c. Who will be responsible for implementing the strategy/intervention? _____
- d. When and where will the strategies/interventions be implemented? _____

- e. Who will monitor progress? _____
- f. How will progress be monitored? _____

- g. Date for SBT follow-up in 6-8 weeks. _____

Who will inform the parents of the Action Plan(s)? _____

Other notes and information: _____

