NCA Request for Academic Assistance

Please complete and return to Amanda Norkoli. This information will be reviewed by members of the Student Success Team and you will be contacted for follow-up.

Date: **Student:**

Grade: **Referring Staff:**

Best time to contact you for follow-up:

Are you looking for new ideas/strategies to address your concerns?

- **YES**
- **NO**

Indicate Academic Area(s) of Concern:

• Math Computation	• Work Accuracy/ quality	• Reading
• Math Concepts/ Application	• Following oral instructions	• Written Expression
• Following written instructions	• Listening comprehension	• Spelling
• Oral Expression	• Other:	

Describe primary concern:

Classroom Data:

Classroom Assessments	**Subject:**
Last 3 Test Scores:	Class range of test scores:
Student's Test Avg:	Classwide Avg:
Student's Current Grade:	Accommodations and/or Modifications used? **Y / N**

Homework Activities (e.g., practice worksheets, reading assignments, etc.)	
% Completed:	Describe Work Quality:
Homework Avg:	

Home/School Partnership	**Yes**	**No**	**Not Applicable**
Letters signed/returned			
Assignment book signed/returned			
Weekly Reading			
Spelling			
Other:			

Additional Notes:

Indicate Preliminary Problem-Solving Steps You Have Taken:

<table>
<tr><th>Action</th><th>Date(s):</th><th colspan="3">Result/Outcome:</th></tr>
<tr><td rowspan="3">1. Reviewed CA-60</td><td rowspan="3"></td><td>Passed Vision screening? Y / N</td><td>Passed Hearing screening? Y / N</td><td>Known physical/medical problems? Y / N</td></tr>
<tr><td>S.I.T. Folder on file? Y / N
(If Yes, specify in next step)</td><td>Retained? Y / N</td><td>Acceptable Attendance? Y / N (10+ per yr)</td></tr>
<tr><td colspan="3">Other Important Info:</td></tr>
<tr><td rowspan="2">2. Implemented prior Intervention Plan on file</td><td rowspan="2"></td><td colspan="3">• Academic plan targeting _____
Progress? Y / N Follow-up Needed? Y / N</td></tr>
<tr><td colspan="3">• Behavior plan targeting _____
Progress? Y / N Follow-up Needed? Y / N</td></tr>
<tr><td>3. Consulted with other school staff</td><td></td><td colspan="3">Describe attempted solution:</td></tr>
<tr><td>4. Contacted Parent</td><td></td><td colspan="3">Describe attempted solution:</td></tr>
</table>

Additional Notes:

Check or Highlight Interventions in Place:

<table>
<tr><td colspan="3">Tier I: The classroom teacher gives additional, individualized, evidenced-based academic support to the students beyond that provided in core/universal instruction (e.g., differentiated instruction).</td></tr>
<tr><td>● Differentiated instruction
● Extra Drill and practice
● Monitor assignments
● Student restates information
● Word Bank</td><td>● Immediate feedback
● Pictures/Charts
● Oral/visual reminders
● Concrete Examples
● Manipulatives</td><td>● Pre-teach content
● Review directions
● Study partners
● Display key vocabulary
● Number lines/models</td></tr>
<tr><td colspan="3">Tier II: Additional direct, explicit, intervention/instruction strategically targets the area(s) of academic deficit; intervention is evidence-based and implemented with fidelity.</td></tr>
<tr><td colspan="3">● If group-based, all students enrolled in an intervention group have a shared intervention need that can reasonably be addressed through the group instruction/intervention provided.
● Occur a minimum of 3-5 times/week in sessions of 30 minutes or more.
● Group size ≤ 7 students
● Specific Program/Strategy:</td></tr>
<tr><td colspan="3">Tier III: Intervention/Instruction intensively targets the skill deficit.</td></tr>
<tr><td colspan="3">● Group size ≤3 students
● Occur daily in sessions of 30 minutes or more.</td></tr>
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