

Secondary Level: Classroom Performance Rating Form

Student: _____ Teacher: _____ Date: _____

Course/Subject: _____ Number of Absences This Year: _____

Period(s) or Day(s) of Week/Time(s) When Course Meets: _____

Global Skills Rating. Rate the student's standing relative to other students in his or her class on the skills listed below. (If you are unsure of the student's abilities on a particular skill, leave it blank.)

| | | | | |
|-------------------------------|---|-------------------------------|-------------------|----------------------|
| Reading Skills | 1 | 2 | 3 | 4 |
| Mathematics Skills | 1 | 2 | 3 | 4 |
| Written Expression Skills | 1 | 2 | 3 | 4 |
| Study & Organizational Skills | 1 | 2 | 3 | 4 |
| Classroom Conduct | 1 | 2 | 3 | 4 |
| | Significantly/Severely Below Grade Level | Somewhat Below Grade Level | At Grade Level | Above Grade Level |

Test/Quiz Grades. Chart the most recent test and/or quiz grades for this student.

| Test | Quiz | Test | Quiz | Test | Quiz | Test | Quiz | Test | Quiz | Test | Quiz |
|-------------------|------|-------------------|------|-------------------|------|-------------------|------|-------------------|------|-------------------|------|
| 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 |
| 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 |
| 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 |
| 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Date: ___/___/___ | | Date: ___/___/___ | | Date: ___/___/___ | | Date: ___/___/___ | | Date: ___/___/___ | | Date: ___/___/___ | |
| Grade: _____ | | Grade: _____ | | Grade: _____ | | Grade: _____ | | Grade: _____ | | Grade: _____ | |
| 1 | | 2 | | 3 | | 4 | | 5 | | 6 | |

Concerns. List up to 3 primary concerns that you have with this student in your classroom:

1. _____
2. _____
3. _____

Strategies. List specific strategies that you have tried in the classroom to support this student in area(s) of concern.

1. _____
2. _____
3. _____
4. _____
5. _____