

## Dyslexia Referral Form (Spanish - for Bilingual Students)

Student's Name _____	ID# _____	Date _____
Date of Birth _____	Gender _____	Grade _____
School _____	Teacher _____	

**Section A: Teacher's Evaluation** (This section should be completed by the student's current or most recent classroom teacher.)

1. **Prior Instruction:** How many years of Spanish formal reading instruction has this student had (circle one)?

$\frac{1}{2}$                       1                      2                      3                      4 or more

2. **Reader Level:** On what level can the student read with reasonable fluency?  
 Assessment used \_\_\_\_\_ Date \_\_\_\_\_ Level \_\_\_\_\_ (within six week time period)

3. **Rate the student in the following areas:**

NOTE: As per the TEA *Dyslexia Handbook Revised 2007*, recommendation for assessment for dyslexia is made only for a student who has not adequately responded to appropriate scientifically based classroom reading instruction as well as intensive intervention AND who exhibits the primary characteristics of dyslexia. An additional consideration is poor reading performance that is UNEXPECTED for the student in relation to the student's other cognitive abilities (oral language skills, ability to learn in the absence of print, or strong math skills in comparison to reading skills).

Characteristics of Dyslexia	(Circle One)		
Difficulty using letters and sounds	Always	Sometimes	Never
Difficulty reading simple sentences fluently (ie., Yo puedo jugar)	Always	Sometimes	Never
Difficulty decoding words in isolation	Always	Sometimes	Never
Difficulty decoding words in text	Always	Sometimes	Never
Difficulty spelling words	Always	Sometimes	Never
Difficulty manipulating sounds in words	Always	Sometimes	Never
Difficulty adding letters/sounds to words when reading/spelling	Always	Sometimes	Never

4. **Composition:** Rate the student's ability to compose and write text as compared to other Spanish speaking students of equal age:

**scribbles/writes**                      **writes only**                      **writes simple**                      **writes with**  
**letters only**                      **single words**                      **sentences**                      **ease**

5. **Spanish Proficiency:** Rate the student's grasp of spoken Spanish when speaking to other Spanish speaking children of equal age:

**better than average**                      **average**                      **a little behind**                      **very limited**

6. **English Proficiency:** Rate the student's grasp of spoken English when speaking to a monolingual, English speaking child of equal age:

**equal or better**      **communicates well**      **communicates but limited**      **unable to communicate**

### Section B: Other Observations

1. **At Risk Factors:** If you are aware of any factors which you feel place this student at academic risk, including **handwriting concerns**, please provide a brief description below. (If you are not aware of any such factors, leave the space below blank.)

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2. Is there a family history of reading difficulties? \_\_\_\_\_Yes \_\_\_\_\_No If Yes, Explain

3. **Student's Work:** Please submit 3-4 dated examples of student's written work, which you feel may help the Response to Intervention (RtI) Team or Committee of Knowledgeable Persons (CKP) in determining the student's eligibility for Dyslexia. (Submit only enough material to guide the CKP in deciding a student's eligibility for the program, e.g., a spelling test, writing sample, other work samples. Do not submit packets of workbook exercises.)

**Section C: Information From Pupil's Cumulative Record (PCR) and/or iDATA Portal:** (The following information must be obtained from the student's PCR and/or iDATA Portal. The person who enters this information may be the classroom teacher or one of the members of the RtI Team or CKP, or any other district personnel assigned to gather this information.)

1. **Program Alternatives:** For each of the special programs below, determine if the student is Currently being served, has been served Previously, or has Never been served by the program. (Circle one for each of the alternate programs listed).

<u>Tutoring</u>	Currently	Previously	Never	<u>Reading Interventions</u>	Currently	Previously	Never
Program_____				Program_____			
<u>Speech</u>	Currently	Previously	Never	<u>Special Education</u>	Currently	Previously	Never
<u>Bilingual</u>	Currently	Previously	Never	<u>ESL</u>	Currently	Previously	Never
<u>OEY</u>	Currently	Previously	Never	Other_____	Currently	Previously	Never

2. **Classroom Records:**

Enter current grade average in Reading: \_\_\_\_\_ Enter last year's grade average in Reading: \_\_\_\_\_  
 Has this student ever been retained? (Circle one) Yes No  
 If "Yes", enter the grade(s) in which the student was retained: Grade(s)\_\_\_\_\_

3. **Assessment Information:**

Primary Expectations TPRI/Tejas LEE (**Required for 1<sup>st</sup> through 3<sup>rd</sup> grade**) Circle one per grade and include most recent copy of TPRI/Tejas LEE Assessment.

Grade	Met Expectations	Did Not Meet Expectations
Kindergarten	Met Expectations	Did Not Meet Expectations
First Grade	Met Expectations	Did Not Meet Expectations
Second Grade	Met Expectations	Did Not Meet Expectations
Third Grade	Met Expectations	Did Not Meet Expectations

Intermediate/Secondary Expectations TAKS (**Required for 3<sup>rd</sup> through 12<sup>th</sup> grade**)

Grade	Month/ Year	Subtest	TAKS Format	Language	Scale Score/ Administration			Lexile Level	Quantile Level
					1st	2nd	3rd		

4. **Woodcock Muñoz** Bilingual/ESL Category: \_\_\_\_\_ CALP Level: \_\_\_\_\_ Date: \_\_\_\_\_