Data Standard KY Referral Rev. 7/1/2025

Overview

Standard prepared by: Amy Patterson

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Office(s) Office of Special Education and Early Learning

Revision history: July 1. 2025 Updated for the new school year.

April 16, 2025 Updated formatting, links, and clarification of steps.

July 1, 2024 Updated for the 2024-25 school year

July 3, 2023 Updated Campus Path to Classic View Added Search Terms Updated The Kentucky Administrative Regulations Link Updated Special Education Resources for Using Infinite Campus (IC) Link Updated screenshots to the new look in IC

March 7, 2023 Updated visuals

August 26, 2022 Updated visuals

May 1, 2020 Updated links Added QA SPED report.

Rev. 4/16/2025

Contents
Overview1
Standard prepared by:1
Data steward(s)1
Office(s)1
Revision history:1
Description
Regulation citation(s)3
Data use
Related ad-hoc filters and reports3
Training3
Section A – KY Referral4
Editor: Referral Header5
Editor: Enrollment Information7
Editor: Student Information9
Editor: Parent/Guardian Information10
Editor: Summary of Interventions11
Editor: Summary of Interventions Data13
Editor: Major Areas of Concern15
Editor: School Information18
Editor: Physical Functioning and Summary of Support
Editor: Documentation of Student Progress

Rev. 4/16/2025

Description

The purpose of the Special Education Data Standards document is to give Kentucky schools and districts a set of guidelines for entering data into the student information system. This document provides a series of screen shots from the Kentucky Student Information System (KSIS), also known as Infinite Campus (IC), and an explanation of the data elements required for state and federal reporting needs. Data standardization is important to ensure consistency in the data across schools in districts and across districts throughout the state.

Within this document, the use of italicized font is being used to denote titles of documents, reports and selection options within IC.

Regulation citation(s)

• The Kentucky Administrative Regulations

Data use

Data are used to meet Federal Reporting Requirements under Sec. 618 of the IDEA:

- December 1 Child Count
- Special Education Exit Report
- Discipline Reporting for Students with Disabilities
- State Performance Plan/Annual Performance Report (SPP/APR)
- Significant Disproportionality and Consolidated Coordinated Early Intervening Services (CCEIS)
- Annual Determinations

Related ad-hoc filters and reports

- KY State Reporting
 - IDEA Dec 1 Count Extract
 - o IDEA Dec 1 Federal Submission Validation Report
 - Special Ed Exit Report
 - SpEd_Evaluation_Detail
- KY State Reporting | KDE Reports
 - Alternate Assessment Tracking Report
 - o QA SPED
- Student Information | Reports
 - Caseload Summary Report
 - Testing Accommodations (KY)

Training

Additional resources can be found on the <u>Special Education Resources for Using Infinite Campus (IC)</u> webpage.

Search Terms: Special Ed Documents

Rev. 4/16/2025

Section A – KY Referral

The KY Referral document is one of the lockable editor-based documents.

To create a KY Referral:

- 1. Go to Student Information | Special Ed | Special Ed Documents or Tool Search 'Special Ed Documents'
- 2. Click the New Document button
- 3. Select Create New Conference Summary/Evaluation
- 4. Select KY Referral
- 5. Click the Create Document button

Cre	ate New Document Wizard
	Please select one of the following documents:
	Create New Conference Summary/Evaluation: Conference Summary, Referral, Consent for Evaluation, Evaluation/Eligibility Determination
	KY Conference Summary
	KY Referral
	KY Consent for Evaluation
	KY Evaluation/Eligibility Determination
	Create New Plan: Goals and Objectives, Services, Accommodations, Transition, and Other Information
	Create New Progress Report: Report measurable progress against ongoing Plan Goals
	Create New Simple Form: Notices, checklists, and supplemental forms
	Create KY Summary Report: Overview of Special Education services including service-related dates.
	DOCUMENT SELECTED FOR CREATION: KY Referral
	Create Document Cancel

Rev. 4/16/2025

Editor: Referral Header

Editor Home - KY Referral 0	-		
NAME			
Referral Header			
Enrolment Information			
Student information			
Parent/Guardian Information			
Summary of Interventions			
Summary of Interventions Data			
Major Areas of Concern			
School Information			
Physical Functioning and Summary of Support			
Documentation of Student Progress	-		
Decementation of Student Progress Referral Header (NOT STARTED)	-		Editor 1 of ¹
Referral Header (NOT STARTED) ARC Decision Date *	Referred Date	Referring Person/Title	Editor 1 of 7
Referral Header (NOT STARTED)	Referred Date month/day/year	Referring Person/Title	Editor 1 of
Referral Header (NOT STARTED) ARC Decision Date *	month/day/year	Referring Person/Title	Editor 1 of 1
Referral Header (NOT STARTED) ARC Decision Date * month/day/year Suspected Disability. Select all suspected disabilities.	month/day/year	Referring Person/Title	Editor 1 of 1
Referral Header (NOT STARTED) ARC Decision Date * month/day/year Suspected Disability: Select all suspected disabilities. For Multiple Disabilities, you may choose additional specific:	month/day/year	Referring Person/Title	Editor 1 of
Referral Header (NOT STARTED) ARC Decision Date * month/day/year Suspected Disability: Select all suspected disabilities. For Multiple Disabilities, you may choose additional specific Select all suspected disabilities	month/day/year	Referring Person/Title	Editor 1 of
Referral Header (NOT STATTE) ARC Decision Date * (month/day/year) Suspected Disability: Select all suspected disabilities. For Multiple Unsabilities, you may choose additional specific. Select all suspected disabilities Select disability area(s) for Developmental Delay:	month/day/year	Referring Person/Title	Editor 1 of
Referral Header NOT STARTED ARC Decision Date *	month/day/year	Referring Person/Title	Editor 1 of
Referral Header (NOT STATTED) ARC Decision Date * month/day/year Suspected Disability: Select all suspected disabilities. For Multiple Disabilities, you may choose additional specific Select all suspected disabilities Select disability area(s) for Developmental Delay: Not Applicable Select disability area(s) for Specific Learning Disability:	month/day/year	Referring Person/Title	Editor 1 of
Referral Header (NOT STATTED) ARC Decision Date * (month/day/year) Suspected Disability: Select all suspected disabilities. Select all suspected disabilities Select all suspected disabilities Select disability area(s) for Developmental Delay: Not Applicable Select disability area(s) for Specific Learning Disability: Not Applicable	month/day/year	Referring Person/Title	Editor 1 of

ARC Decision Date: Enter the date the ARC meets for referral.

Referred Date: Enter the date the student was first referred for testing. This field is optional and is not used for compliance purposes.

Suspected Disability: Select all suspected disabilities. If *"Speech or Language Impairment"* will be considered as <u>either</u> a primary disability <u>or</u> a related service, choose it as a *Suspected Disability*.

		_
	spected Disability: Select all suspected disabilities. r Multiple Disabilities, you may choose additional specific disabilities by clicking in the white area.	
	Select all suspected disabilities	
	Autism	^
	Deaf-Blindness	L
	Developmental Delay	
	Emotional-Behavioral Disability	
	Functional Mental Disability	
١.,	Hearing Impairment	•

Rev. 4/16/2025

If Multiple Disabilities (MD) are suspected, select *Multiple Disabilities* as well as the specific disabilities suspected.

Referral Header (NOT STARTED)		Editor 1 of 10
ARC Decision Date * month/day/year	Referred Date 🛱 month/day/year	Referring Person/Title
For Multiple Disabilities (Solutional Strength Constraints)		×
Deaf-Blindness		A
Developmental Delay Emotional-Behavioral Disability		
Functional Mental Disability Hearing Impairment		
		•

Reminder: Please be aware that some combinations are not appropriate for MD. Please see 707 KAR 1:002, Section 1 (39) and the <u>Multiple Disabilities Eligibility Determination (ky.gov)</u> for more information.

Select disability areas for 'Developmental Delay': If *Suspected Disability* is "*Developmental Delay*", select all areas that are suspected.

Suspected Disability: Select all suspected disabilities. For Multiple Disabilities, you may choose additional specific disabilities by clicking in the white area.	
Developmental Delay 🔕	×
Emotional-Behavioral Disability	^
Functional Mental Disability	
Hearing Impairment	
Mild Mental Disability	
Multiple Disabilities	

Select disability area(s) for 'Specific Learning Disability': If Suspected Disability is "*Specific Learning Disability*", select all areas that are suspected.

Specific Learning Disability 😣	×
elect disability area(s) for 'Developmental Delay':	
Not Applicable	
elect disability area(s) for 'Specific Learning Disability':	
Select disability area(s) for 'Specific Learning Disability'	
Oral Expression	
Written Expression	
Reading Fluency Skills	

Select disability area(s) for 'Speech or Language Impairment': If Suspected Disability is "Speech or Language Impairment", select all areas that are suspected.

Rev. 4/16/2025

Speech or Language Impairment 😵	×
Select disability area(s) for 'Developmental Delay':	
Not Applicable	
Select disability area(s) for 'Specific Learning Disability':	
Not Applicable	
Not Applicable select disability area(s) for 'Speech or Language Impairment':	
elect disability area(s) for 'Speech or Language Impairment':	
relect disability area(s) for 'speech or Language Impairment': Select disability area(s) for 'speech or Language Impairment'	
elect disability area(s) for 'Speech or Language Impairment': Select disability area(s) for 'Speech or Language Impairment' Speech Sound Production and Use	

Note: The Save button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

Editor: Enrollment Information

Editor Home - KY Referral 0
NAME
Referral Header
Enrollment Information
Student Information
Parent/Guardian Information
Summary of Interventions
Summary of Interventions Data
Major Areas of Concern
School Information
Physical Functioning and Summary of Support
Documentation of Student Progress

Rev. 4/16/2025

Enrollment Information (NOT STARTED)			Editor 2 of 10
Click Refresh to retrieve a new copy of data from a selected Primary Disability if currently identified None	Enrollment record.		
Grade School Name	General Education Teacher School Phone		
District Information			
District Number District Address District SPED Address	District Name	District Phone District SPED Phone	

Always click the *Refresh* button to update the information.

Save & Stay	•	Refresh	Cancel	Complete

Clicking the *Refresh* button may bring up an Enrollments panel on the right-hand side of the screen. Select the current enrollment.

Rev. 4/16/2025

Editor: Student Information

National Information Subcrite/Information Subcrite/Information Perrol/Quarkation Metanon Mithode Outcomes Metanone Mithode Outcomes Metanone Mithode Outcomes Metanone Binderword Outcomes Metanone Binderword Outcomes Metanone Binderword Outcomes Metanone Binderword Outcomes Metanone Subscrite/Outcomes Subscrite/Outcomes Subscrite/Outcomes Mithode Metanone Subscrite/Outcomes Subscrite/Outcomes Mithode Metanone Outcomes Mithode	Editor Home - KY Evaluation/Eligibility	Determination ()			
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Bisdere Information Preset/Cuardan Information Multi Disciptinary Report BiRdenew of Existing Data Multi Disciptionarization of the Student's Information is taken from Existing Communication of the Student's Information is taken from Existing Data Gender Birdate Reace, Ethnichty Birdate Adress Staten Nameber Staten Data Case Manager Information Staten Nameber Staten Data Case Manager Information Staten Nameber Staten Data Reace Data Existing Data Staten Data Case Manager Informatinfordistation of the Student's Information of	Evaluation Header				
Perert/Cuardam Information Multi Desciptinary Report BRReview of Existing Datas BRReview of Existing Datas BRReview of Existing Datas BRReview of Current Performance Eightlify Form Eightlify Potemination Eightlify Determination When an Evaluation is generated, a student's information is taken from Evaluent's information is taken for efficiency a new copy of data. Kate Name Midde Name Student Name Minder Address Prins Name Midde Name State ID Cess Manager Information Name Tele	Enrollment Information				
Multi Discipinary Report Bit-Review of Excasing Data Bit-Review of Excasing Data Bit-Review of Excasing Bit-Review of Current Performance Eightliny Form Eightliny Form Eightliny Determination When an Evaluation is generated, a subject To the student's information is taken for the student's information is taken to testice. Exclose Referesh to retrieve a new copy of the student's information is taken to testice. Exclose Referesh to retrieve a new copy of the student's information of the Student's information's in	Student Information				
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IntRevenue of Records IntRevenue of Current Performance Eigelity Form Eigelity Potemination University Eigelity Potemination Eigelity Potemina	Multi-Disciplinary Report				
ItReferent of Current Performance Eigbality Form Eigbality Dotermination Iteration Improvementation Statem Stat	RR-Review of Existing Data				
Eigelity Form Ei	RR-Review of Records				
Eigebity Determination Eigebity Determination Eigebity Determination When a Evaluation is generated, a subject the student's information is taken from U.S. Click Refresh to retrieve a new copy of data. Last Name Middle Mame Middle Mame Middle Mame Gener Race, Ethnicity Address Primary Mode of Communication of the Student Amme Title	RR-Review of Current Performance				
Student Information Improcesses Editor 3 of 10 When an Evaluation is generated, a snapshot of the student's information is taken from SciEck Refresh to retrieve a new copy of data. Editor 3 of 10 When an Evaluation is generated, a snapshot of the student's information is taken from SciEck Refresh to retrieve a new copy of data. Suffix Gender Midde Name Suffix Gender Primary Mode of Communication of the Student Suffix Address Student Namber State ID Case Manager Information Name Title Title	Eligibility Form				
When an Evaluation is generated, a snapped of the student's information is taken from Verse. Click Refresh to retrieve a new copy of data. Last Name Midde Name Suffix Gender Birthdate	Eligibility Determination				
When an Evaluation is generated, a snapped with student's information is taken from X-Bit SciCk Refresh to retrieve a new copy of data. Last Name Midde Name Suffix Gender Bit Rist Name Midde Name Suffix Race, Ethnicity Primary Mode of Communication of the Student					
Las Name First Name Middle Name Suffix Gender Birthdale					
Las Name First Name Middle Name Suffix Gender Birthdale	Student Information (IN PROGRESS)			Editor 3 of 10
Race, Ethnicity Primary Mode of Communication of the Student Image: Information Student Number Case Manager Information Hame Title			n from Census. Click Refresh to retrieve a	new copy of data.	Editor 3 of 10
Address Student Number State 10 Case Manager Information Kame Title	When an Evaluation is generated, a snapsh	hot of the student's information is take			Editor 3 of 10
Address Student Number State ID Case Manager Information Name Title	When an Evaluation is generated, a snapsh Last Name	not of the student's information is take First Name			Editor 3 of 10
Case Manager Information Name Title	When an Evaluation is generated, a snapsh Last Name Gender	hot of the student's information is take First Name Birthdate	Middle Name Student		Editor 3 of 10
Name Title	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity	hot of the student's information is take First Name Birthdate	Middle Name Student	Suffix	Editor 3 of 10
	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity	hot of the student's information is take First Name Birthdate	Middle Name Student	Suffix	Editor 3 of 10
Phone	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity Address	hot of the student's information is take First Name Birthdate	Middle Name Student	Suffix	Editor 3 of 10
	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity Address Case Manager Information	hot of the student's information is take First Name Birthdate	Middle Name Student Student Number	Suffix	Editor 3 of 10
	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity Address Case Manager Information Name	hot of the student's information is take First Name Birthdate	Middle Name Student Student Number	Suffix	Editor 3 of 10
	When an Evaluation is generated, a snapsh Last Name Gender Race, Ethnicity Address Case Manager Information Name	hot of the student's information is take First Name Birthdate	Middle Name Student Student Number	Suffix	Editor 3 of 10

Always click the *Refresh* button to update the information.



Clicking the *Refresh* button may bring up an Enrollments panel on the right-hand side of the screen. Select the current enrollment.

Primary Mode of Communication of the Student: This is the only editable field in this editor. Select the student's preferred language.

Note: The Save button MUST be clicked before proceeding.



Rev. 4/16/2025

Editor: Parent/Guardian Information

Editor Home - KY Evaluation/Eligibility Determination 0		
NAME		
Evaluation Header		
Enrollment Information		
Student Information		
Parent/Guardian Information		
Multi-Disciplinary Report		
RR-Review of Existing Data		
RR-Review of Records		
RR-Review of Current Performance		
Eligibility Form		
Eligibility Determination		
Depart (Overslight Information (Editor 4 of 10
Parent/Guardian Information (IN PROGRESS)		Eultor 4 of 10
Parent/Guardian Information (NPROGRESS) When an Evaluation is generated, a snapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of		
When an Evaluation is generated, a snapshot of the parent/guar		
When an Evaluation is generated, a snapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of		
When an Evaluation is generated, a snapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of Foster, Meagan - Mother, natural/adop Print Sequence		ne Guardian checkbox marked on the Relationship tool for
When an Evaluation is generated, a anapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of Poster, Meagan - Mother, natural/adop Print Sequence	f data.	ne Guardian checkbox marked on the Relationship tool for
When an Evaluation is generated, a anapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of Poster, Meagan - Mother, natural/skop Print Sequence Address Home Phone Work Phone	f data.	ne Guardian checkbox marked on the Relationship tool for
When an Evaluation is generated, a anapshot of the parent/guar the student display below. Click Refresh to retrieve a new copy of Foster, Mesgan - Mother, natural/edop Print Sequence Address Home Phone Work Phone E-mail Primary Mode of Communication in the Home	f data.	ne Guardian checkbox marked on the Relationship tool for
When an Evaluation is generated, a snapshot of the parent/guar When an Evaluation is generated, a snapshot of the parent/guar Forster, Meagan - Mother, natural/adop Forster, Meagan - Mother, natural/adop Print Sequence Address Home Phone E-mail Primary Mode of Communication in the Home Student Representation	f data.	ne Guardian checkbox marked on the Relationship tool for

Always click the *Refresh* button to update the information.



Clicking the *Refresh* button may bring up an Enrollments panel on the right-hand side of the screen. Select the current enrollment.

Primary Mode of Communication in the Home: Select the preferred language used in the home setting.

Student Represented by: Select who represents the student in accordance with district procedures and the Determination of Student Representative form.

Rev. 4/16/2025

	•
Parent	
Guardian	
Self	

Does Student Live with Parents? Select Yes or No.

If No, With Whom Does the Student Live? Enter full name.

*Note: If "No" is selected, *Relationship* must be specified to save.

Relationship: Indicate the relationship to the person with whom the student lives.

General Education Teacher: Enter the student's general education teacher.

Referring Person/Title: Enter full name and title. This may be someone within school or outside the school district.

Note: The Save button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

Editor: Summary of Interventions

Editor Home - KY Referral 0
NAME
Referral Header
Enrollment Information
Student Information
Parent/Guardian Information
Summary of Interventions
Summary of Interventions Data
Major Areas of Concern
School Information
Physical Punctioning and Summary of Support
Documentation of Student Progress

Rev. 4/16/2025

Summary of Interventions (NOT STARTED)	Editor 5 of 10	
Directions; This form is to be completed prior to a referral for a Special Education Evaluation. Attach the Rtl worksheet(s) and progress monitoring data for each area or This form and the data results must be filed in the Due Process Folder after the referral ARC.	of concern.	
Note: Interventionist refers to the individual(s) delivering the intervention.		
1. Describe the area being targeted for intervention and means of identifying the need.		
2. Indicate the <u>area(s) of suspected disability</u> ,		
Interventions must match deficit areas of the disability suspected		
	<i>k</i>	
Tier Intervention Data, #'s 3-5, are located on the 'Summary of Interventions Data' Editor. Please complete accordingly.		

For students in early childhood, please refer to the Preschool Standards.

The Summary of Interventions section is required for all referrals. Documentation is required, either in the referral document or the conference summary, that each intervention tier was discussed.

- 1. Describe the <u>area being targeted</u> for intervention and <u>means of identifying</u> the need.
- 2. Indicate the <u>areas(s) of suspected disability</u> (interventions must match deficit areas of the disability suspected.

Note: The Save button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

Rev. 4/16/2025

Editor: Summary of Interventions Data

Editor Home - KY Referral 0
NAME
Referral Header
Enrollment Information
Student Information
Parent/Guardian Information
Summary of Interventions
Summary of Interventions Data
Major Areas of Concern
School Information
Physical Functioning and Summary of Support
Documentation of Student Progress

Select the *New* button. Use this button to add each tier of intervention completed.

Sum	nmary of Interventions Data (NOT STARTED)			Editor 6 of 10
20	Tier intervention 1	Begin Date 🕴 2	End Date	
		No records available.		^
н	< > »		0	- 0 of 0 items
New	Cancel Complete •			Print

Interventions: Choose a Tier from the drop-down menu.

Note: Intervention data shall be discussed and documented by the ARC.

Rev. 4/16/2025

Summary of Interventions Data			
Interventions*]		
Tier I Interventions	eneral education classroom to address the area being targeted and the name of the interventionist.		
Tier II Interventions			
Tier III Interventions			
Impact: What was the end result? What was the final level	/score?		
Expected Progress: Where should the student have been at the end of this intervention?			
Duration and Frequency			
Start Date * month/day/year Frequency of Service	End Date Tmonth/day/year		

Describe the intervention(s) implemented in the general education classroom to address the areas being targeted and the name of the interventionist: Clearly describe the interventions that the student is receiving as well as the name and title of the individual providing the interventions.

Begin Date: Enter the date the intervention began.

End Date: Enter the date the intervention ended.

Frequency of Service: Describe how often the student is participating in the intervention (examples: once per week, 3 times per month)

Amount of Time: Describe the length of time the student is participating in the intervention (example: 30 minutes)

Impact: Describe the end result.

Expected Progress: Describe where the student should have been at the end of the intervention.

Note: The Save (not Save & New or Save & Next) button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

Rev. 4/16/2025

Editor: Major Areas of Concern

Editor Home - KY Referral 0
NAME
Referral Header
Enrollment Information
Student information
Parent/Guardian Information
Summary of Interventions
Summary of Interventions Data
Major Areas of Concern
School Information
Physical Functioning and Summary of Support
Documentation of Student Progress

Select the *New*

Major Areas of Concern (NOT STARTED)		Editor 7 of 10
28 Ares †	Reason for Referring	
	No records available.	^
		-
н « » н	0	0 of 0 items
New Cancel Complete *		Print

Major Areas(s) of Concern Editor: Select each reason for referring this student and specify when "*Other*" is selected.

Rev. 4/16/2025

Area(s)*	
	•
Communication	^
Academic Performance	ce
Health, Vision, Hearing Abilities	g and Motor
Social and Emotional	Status
General Intelligence	
	•
Major Areas of Concern	
Area(s)*	Reasons for Referring *
Academic Performance	
Other, Specify*	Oral Expression
	Written Expression
	man expression
	Reading Comprehension
Specialized Equipment Used by Student:	Reading Comprehension
Specialized Equipment Used by Student:	Reading Comprehension Mathematics Calculation
Specialized Equipment Used by Student:	Reading Comprehension Mathematics Calculation Listening Comprehension

Once an area of concern has been chosen, a *Reason for Referring* field will appear. Click in the field and select all applicable reasons (multiple selections may be made). The reasons listed vary by area of concern, as displayed below.

Area(s)*	Reasons for Referring *	
Communication •		
	Communicates Basic Needs and Wants	
Other, Specify*	Articulation	
	Knowledge of Sound/Letter Association	
	Expressive Language	
	Voice Quality	1

Area(s)*	Reasons for Referring *	_
Health, Vision, Hearing and Motor 🔻		
	Gross Motor Skills-Body Control	
Other, Specify*	Gross Motor Skills-Locomotion	
	Vision	
	Developmental History	н.
	Fine Motor Skills-Perceptual Motor	

Rev. 4/16/2025

Area(s)*	Reasons for Referring *
Social and Emotional Status	
	Interaction with Peers
Other, Specify*	Interaction with Adults
,	Acceptance of Rules
	Acceptance of Correction
	Acceptance of Disappointment
Area(s)*	Reasons for Referring *
General Intelligence	
	Understanding New Concepts
	Interpreting Data to Make Decisions
Other, Specify*	
	Comparing/Contrasting Ideas of Objects
	Perceptual Discrimination
	Predicting Events/Results
Area(s)*	Reasons for Referring *
Work Skills / Technical / Vocation	
	Attending to Task
Other, Specify*	Following Directions
ours, speerry	Independent Work Habits
	Seeking Assistance When Needed
	Using Research Tools Effectively

Once an area is chosen and saved, it will be higlighted within the drop list.

Major Areas of Concern		
Area(s) * Communication	Reasons for Referring * Communicates Basic Needs and Wants Articulation	
	Knowledge of Sound/Letter Association Expressive Language Voice Quality	h
Specialized Equipment Used by Student:	Receptive Language Other Specify	
		li

If Other Specify is chosen as a Reason for Referring, text is required in the Other, Specify box.

Rev. 4/16/2025

Area(s)* Communication	Reasons for Referring * Other Specify ② ×	
Other, Specify*		
Specialized Equipment Used by Student:		
		li

Specialized Equipment Used by Student: Indicate any specialized equipment currently being used by the student, such as glasses, hearing aids, wheelchair, leg braces or other.

Specialized Equipment Used by Student:		
		li

Note: The Save (not Save & New or Save & Next) button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

Editor: School Information

Editor Home - KY Referral 0	
NAME	
Referral Header	
Enrollment Information	
Student Information	
Parent/Guardian Information	
Summary of Interventions	
Summary of Interventions Data	
Major Areas of Concern	
School Information	
Physical Functioning and Summary of Support	
Documentation of Student Progress	

Rev. 4/16/2025

School Informati	ION (NOT STARTED)					Editor 8 of 10
Number of Schools Atten	ded to date:					
Year ↓	Grade	Days Enrolled	# of Absences Excused	# of Absences Unexcused	# of Tardies Excused	# of Tardies Unexcused
\$			*	*	•	
•			\$	•	•	•
			•	•	\$	\$
•			•	•	•	\$
Years in School Including	Current Year	Years in Primary F	Program Including Current Year	Repeated	Grades:	
Summary of Most Recent Reading Solence Solence Solence Reditional Content 1 Beoly Content Name Reditional Content 2 Reditional Content 2 Reditional Content 3 Specify Content Name	Grades (Provide Current or Me	Content Grade 2 Grade specific to a Content Grade 3	eceived by Content): additional content 1 additional content 2 additional content 3	Spelling Social Stu	des	
Summary of Standardize Test Name	d Group Test Data (Attach cop	ies): Date ↓	Reading	Math	Language	Spelling
		month/day/year				
		month/day/year				
		month/day/year				
		month/day/year				

Number of Schools Attended to date: Enter the number of schools the student has attended. If the student is younger than school age, enter "*N/A*."

Year and Grade: Enter the current year and grade.

Days Enrolled: Enter the number of days enrolled in the current school for the current year.

Number of Absences Excused/Unexcused: Enter the number of excused and unexcused absences for the current year.

Number of Tardies Excused/Unexcused: Enter the number of excused and unexcused tardies for the current year.

Years in School including Current Year: Enter the number of years in grades K-12.

Years in Primary Program including Current Year: Enter the number of years in grades K-03. *Repeated Grades*: Enter the number of times the student has repeated a grade.

Summary of Most Recent Grades: Enter the current or most recent grades the student received for each content area for grades 04-12. For primary students (grades K-03), refer to the district grading standards.

Summary of Standardized Group Test Data: Enter the current or most recent results from tests, such as MAP, GRADE, CTBS, G-MADE, etc. Up to four additional tests may be added. Upload copies of the assessment results, if applicable.

Add New Test: Click this button for each additional test.

Rev. 4/16/2025

Note: The Save button MUST be clicked before proceeding.



Save & Next: Saves the data in the editor and moves to the next editor. Save: Saves the data in the editor and navigates to the *Editor Home* showing all editors. Save & Stay: Saves the data in the editor and stays on the same editor. Complete: If all the information is finalized, click the Complete button.

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Rev. 4/16/2025

NAME			
Referral Header			
Enrolment Information			
Student Information			
Parent/Guardian Information			
Summary of Interventions			
Summary of Interventions Data			
Major Areas of Concern			
School Information			
Physical Functioning and Summary	of Support		
Documentation of Student Progres			
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Editor: Physical Functioning and Summary of Support

Enter Screening Date for each area and indicate Pass or Fail.

Note: Vision, Hearing and Motor screening are required when SLD is suspected.

Describe any Existing Medical Health Conditions Below: Enter any existing medical health conditions. *Is Student Currently on Medication?* Enter Yes or No. *Specify Type and Dosage Below*: Specify student's medication.

Rev. 4/16/2025

Summary of Past and Present Support					
Has this student been evaluated for special educat	tion previously?	If yes, When was the student e		What was the	suspected area of disability?
	•	month/day/year			
What services is this student receiving or wh in the past.	hat services has t	this student received in the	past? For the se	rvices below, enter [C] if current	tly receiving or [P] if the service was provided
Limited English Proficient	Migrant		Title 1		Speech Language
504	Extended School	Services	Gifted and Tal	ented	
Involvement with Outside Agency(ies)	Agency:				
•					
Describe services that are being provided to this st	tudent by the agenc	:y(ies) listed above:			
					6

Has this student been evaluated for special education previously? Indicate if the student was previously evaluated.

When was the student evaluated? If the student was previously evaluated, enter the date of the evaluation.

What was the suspected area of disability? If the student was previously evaluated, enter the suspected area of disability.

Indicate services the student currently receives or has received in the past by entering "C" if currently receiving **or** "P" if services were provided in the past.

Involvement with Outside Agencies: Indicate agencies with which the student has been involved, such as Pathways, Inc., IMPACT, Comprehend, Commission for Children with Special Health Care Needs, First Steps, VIPS, etc.

Describe services that are being provided to this student by the agency(ies) listed above: Indicate any services provided by the outside agencies listed.

Note: The Save button MUST be clicked before proceeding.



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Editor: Documentation of Student Progress

Editor Home - KY Referral 0
NAME
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Envolment Information
Student Information
Parent/Guardian Information
Summary of Interventions
Summary of Interventions Data
Major Areas of Concern
School Information
Physical Functioning and Summary of Support
Documentation of Student Progress

Rev. 4/16/2025

Click the *New*

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Documentation of Student Progress Scores from District Universal Screenings: Tet Name:* Tet Name:* Reading Date Math Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Date Imonth/day/year Imo	* * * *	0-0 uf S Anna	
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Math Dute Câ Language Date Câ Behavior Dute	Reading		
Language Date month/day/year (2) Behavior Date	Math	Date	
Behavior Date		Inoniai, ady year	
month/day/year	Language		

Complete this section to document district universal screenings.

Test Name: Enter the test name.

Reading: Enter the score and date for the reading portion of the universal screening, if applicable. **Math:** Enter the score and date for the math portion of the universal screening, if applicable. **Language:** Enter the score and date for the language portion of the universal screening, if applicable. **Behavior:** Enter the score and date for the behavior portion of the universal screening, if applicable.

Note: The Save (not Save & New or Save & Next) button MUST be clicked before proceeding.



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Rev. 4/16/2025

Complete: If all the information is finalized, click the Complete button.

Once the Referral is completed, select the *Documents* tab. Select the *Referral* document and then select the *Lock/Unlock* button to lock it.

