

# Be@School

## Assessment Meeting

<b>Date:</b> Click here to enter text.		<b>School:</b> Click here to enter text.
<b>Student:</b> Click here to enter text.		<b>Parent(s)/Guardian(s):</b> Click here to enter text.
<b>Meeting Facilitator:</b> Click here to enter text.		<b>Absences (Excused &amp; Unexcused):</b> Click here to enter text.
<b>Grade:</b> Click here to enter text.	<b>IEP/504:</b> Click here to enter text.	<b>Credits Earned/Credits Needed:</b> Click here to enter text.

In attendance	Members	Contact Information (#, email)
<input type="checkbox"/>	<i>Student</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Parent/Guardian</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Parent/Guardian</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Principle/Assistant Principle</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Dean</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>School Social Worker</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>School Counselor</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Case Manager</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Spec.Ed. Teacher</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Support Staff</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Cultural Liaison</i> Click here to enter text.:	Click here to enter text.
<input type="checkbox"/>	<i>Interpreter</i> Click here to enter text.	Click here to enter text.
<input type="checkbox"/>	<i>Other</i> Click here to enter text.	Click here to enter text.

<p><b>Goals/Vision for Student</b> Click here to enter text.</p>
<p><b>Strengths</b> Click here to enter text.</p>
<p><b>Concerns</b> Click here to enter text.</p>
<p><b>Services/Interventions</b> Click here to enter text.</p>

### Next Steps

Action	Timeline	Person(s) Responsible
Click here to enter text.	Click here to enter a date.	Click here to enter text.
Click here to enter text.	Click here to enter a date.	Click here to enter text.
Click here to enter text.	Click here to enter a date.	Click here to enter text.
Click here to enter text.	Click here to enter a date.	Click here to enter text.
Click here to enter text.	Click here to enter a date.	Click here to enter text.
Click here to enter text.	Click here to enter a date.	Click here to enter text.

### Follow-Up Meeting(s)

Date(s)	Time(s)	Attendees
Click here to enter a date.	Click here to enter text.	Click here to enter text.
Click here to enter a date.	Click here to enter text.	Click here to enter text.