



Quality Learning and Superior Performance for All

Special Education Department 1120 Dahlonega Highway Cumming, GA 30040 770-887-2461 FAX 770-888-1278

Forsyth County CHILD FIND **Referral and RTI Procedures**

If you suspect a child is struggling developmentally in any of the following areas: **cognitive/academic, social/emotional, adaptive behavior, physical**, and/or in **communication** you may refer them to the Forsyth County Child Find for a classroom observation and suggested RTI strategies. You will find the referral paperwork on the Forsyth County Schools website. See below.

www.forsyth.k12.ga.us

Look to the left bottom of the screen in Quick Links

Click on ***SPECIAL EDUCATION***

Click on ***PRE-SCHOOL PORTAL***

Click on ***DAYCARES & PRESCHOOLS***

Look in the blue area and Click on ***Referral/RTI Procedures and Forms***

Copy all forms and fill them out **COMPLETELY.**

Fax or mail ENTIRE pack of information to:

Fax: c/o Shad Mason/PreK Department-RTI

Fax # 770-888-1278

Mail: Hill Center c/o Shad Mason/PreK Department-RTI

136 Elm Street

Cumming, GA 30040

Once forms are received:

- An observation will be scheduled. Observations will last approximately 30 minutes. The observation will be briefly discussed with the teacher and the parent.
- If the observer feels more strategies and interventions (RTI) could be put into place to help the child, it will be discussed with the director and teacher. The parent will also be informed of any procedures suggested. The teacher will collect data on the outcome of recommended strategies and interventions.
- **Not all children qualify for special education services.** Recommendations will be made after reviewing the observation notes, the results of the rating scales, and the outcome data provided by the teacher. If no problems have been noted that fall under special education then it is the responsibility of the school to address the problems at their school level.
- If a full evaluation is recommended the parent will need to register the child for a full evaluation at the Hill Center. Directions are online.

Forsyth County School System

CHILD STUDY TEAM PARENT CONSENT FOR SCREENING

Date: _____

Dear Parent/Guardian:

Your child, _____, has been referred for a classroom observation or a school screening that will be helpful in determining specific problem areas. Test results will be used by the Child Study Team to plan remedial help, assist the teacher in designing alternative teaching techniques, or in determining the need for more comprehensive evaluation.

Should you have any questions about the reasons for our request, please feel free to contact: Shad Mason @770-887-2461 ext.312720 or email at smason@forsyth.k12.ga.us

Please check and return this portion of the letter to your child's teacher as soon as possible.

_____ I agree for my child to be screened/observed

_____ I do not agree

Child's name _____ DOB _____

Parent's name _____ Parent's phone # _____

Parent's email _____

_____ Date _____

Parent's Signature

FORSYTH COUNTY SCHOOL SYSTEM
Response to Intervention (RTI)
DEPARTMENT FOR EXCEPTIONAL STUDENTS
PRE-SCHOOL STUDENT PROFILE
TEACHER INFORMATION FORM

Date:	
Child's Name:	D.O.B.
School:	*School Address (needed to mail rating scales)
Teacher's Name:	*Teacher's email: (needed to communicate with teacher and email recommended strategies)
Days enrolled:	Preferred Observation Times:

Brief description of area(s) of concern:

Brief description of child's strengths:

**Please return all pages to
Shad Mason by fax or mail:**

Fax:

Fax # 770 888-1278
c/o Shad Mason/Preschool RTI

Mail:

Hill Center c/o Shad Mason Pre-K Dept.
136 Elm Street
Cumming, GA 30040

FORSYTH COUNTY SCHOOL SYSTEM
Response to Intervention (RTI)
DEPARTMENT FOR EXCEPTIONAL STUDENTS
PRE-SCHOOL STUDENT PROFILE
TEACHER INFORMATION FORM

TEACHER RATING: *Please answer all items to the best of your ability. Describe the primary area(s) of difficulty. Attach a separate sheet if needed. Based on the abilities of children the same age, please complete the following information:*

Answer Key: Y = Yes(most of the time); N = No

SPEECH/LANGUAGE: Does the child...		Y	N
Check yes for the most appropriate description of how the child communicates.	Gestures?		
	Sounds?		
	Words?		
	Phrases?		
	Sentences?		
	Echoing/Repeating?		
Show frustration due to a communication problem?			
Speak clearly enough to be understood by adults and children?			
Understand conversations?			
Communicate wants and needs?			
Express thoughts appropriately?			
Attend to a short story?			
Answer simple yes/no questions?			
Answer simple 'wh' questions?			
Comments? Explain your responses if needed:			

SOCIAL/ ADAPTIVE: Does the child...	Y	N
Follows familiar simple directions independently (e.g., sit in chair; get out your crayons; come here; etc.)?		
Follow familiar classroom routines independently (e.g., unpacks book bag; put things away; line up; etc.)?		
Sit independently in circle time?		
Circle most appropriate: for 2 min. 5min. 10 min. 15 min.		
Actively listen/participate in circle time?		
Work independently?		
Organize and clean up after?		
Focus on activity?		
Play alone?		
Interact with peers?		
Work/play in group cooperatively?		
Adjust/transition to new activity?		
Circle most appropriate: Independently/some help Full adult support Has meltdowns		
Use restroom independently?		
Comments? Explain your responses if needed:		

ACADEMICS / COGNITIVE: Does the child...	Y	N
Play/work appropriately with materials provided?		
Follow 1-step directions?		
Follow simple 2-step directions?		
Learn concepts at the level and rate of peers?		
Show good memory skills?		
Show independence in learning and participating in academic activities?		
Show understanding of colors/shapes?		
Stay on task for 3-4 minutes or until task is completed?		
Comments? Explain your responses if needed:		

MOTOR: Does the child...	Y	N
Walk, jump, run like peers?		
Participate in writing, drawing, and cutting like peers?		
Comments? Explain your responses if needed:		

BEHAVIOR: Does the child...	Y	N
Get along with peers?		
Work best in small groups?		
Have trouble interacting appropriately with peers?		
Control his/her activity level? Circle the most appropriate answer to describe the child's activity level. Low Average Overly Active Distractible		
Willingly participate in class? Circle the most appropriate answer to describe the child's participation level. Attempts all/most tasks Refuses to do many tasks Refuses to do all tasks		
Show frustration in class? Circle the most appropriate answer to describe how the child shows frustration. Tantrums Perseveres teacher support Shuts down/refuses interaction		
Comments? Explain your responses if needed:		

Other questions:
Are there family circumstances that should be noted? Explain:
Are there any other relevant comments or concerns? Explain:
List any on-going medical problems, parent concerns, and/or teacher concerns:
List or attach any types of evaluations previously completed