

SPECIFIC LEARNING DISABILITIES (SLD) TEAM REPORT

Local Education Agency (LEA)

Student's Full Name _____ Date _____

School _____ Date of Birth _____

Parent(s)/Guardian(s) _____ Grade _____

Address _____ WVEIS# _____

City/State/Zip _____ Telephone _____

Initial Reevaluation

The Eligibility Committee (EC) must respond yes to each of the yes/no statements below to determine if the student meets the specific learning disabilities criteria.

1.	The student's multidisciplinary evaluation was sufficiently comprehensive to identify the student's special education and related services needs and administered in accordance with evaluation procedures specified in <i>Policy 2419</i> .	<input type="checkbox"/> Yes <input type="checkbox"/> No								
2.	Based on multiple and convergent sources of data, the student's level of learning reflects low academic performance compared to same-age peers when provided with learning experiences and instruction appropriate for the student's age or State-approved grade-level standards (West Virginia College- and Career-Readiness Standards-[WVCCR]) in one or more of the following areas (<i>Check all areas that apply</i>): <table style="width: 100%; margin-top: 10px;"> <tr> <td><input type="checkbox"/> Oral Expression</td> <td><input type="checkbox"/> Reading Comprehension</td> </tr> <tr> <td><input type="checkbox"/> Listening Comprehension</td> <td><input type="checkbox"/> Reading Fluency Skills</td> </tr> <tr> <td><input type="checkbox"/> Written Expression</td> <td><input type="checkbox"/> Mathematics Calculation</td> </tr> <tr> <td><input type="checkbox"/> Basic Reading Skills</td> <td><input type="checkbox"/> Mathematics Problem Solving</td> </tr> </table>	<input type="checkbox"/> Oral Expression	<input type="checkbox"/> Reading Comprehension	<input type="checkbox"/> Listening Comprehension	<input type="checkbox"/> Reading Fluency Skills	<input type="checkbox"/> Written Expression	<input type="checkbox"/> Mathematics Calculation	<input type="checkbox"/> Basic Reading Skills	<input type="checkbox"/> Mathematics Problem Solving	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Oral Expression	<input type="checkbox"/> Reading Comprehension									
<input type="checkbox"/> Listening Comprehension	<input type="checkbox"/> Reading Fluency Skills									
<input type="checkbox"/> Written Expression	<input type="checkbox"/> Mathematics Calculation									
<input type="checkbox"/> Basic Reading Skills	<input type="checkbox"/> Mathematics Problem Solving									
3.	Identify the method used to determine Eligibility: <input type="checkbox"/> The student fails to achieve a rate of learning to make sufficient progress to meet State-approved grade-level standards (WVCCR) in one or more of the areas identified above when assessed using the MTSS process. <input type="checkbox"/> OR <input type="checkbox"/> The student exhibits a pattern of strengths and weaknesses in performance, achievement or both, relative to age, State-approved grade-level standards (WVCCR) or intellectual development that is determined by the group to be relevant to the identification of a specific learning disability.	<input type="checkbox"/> Yes <input type="checkbox"/> No								
4.	The EC has determined that the student's achievement deficits are NOT primarily the result of a visual, hearing, or motor disability; an intellectual disability; emotional disturbance; cultural factors; environmental or economic disadvantage; or limited English proficiency.	<input type="checkbox"/> Yes <input type="checkbox"/> No								
5.	Evaluation information and documentation confirm that lack of appropriate instruction in English language arts or mathematics was NOT the determinant factor in the eligibility decision.	<input type="checkbox"/> Yes <input type="checkbox"/> No								
6.	Evaluation information confirms there is an adverse effect on the student's educational performance.	<input type="checkbox"/> Yes <input type="checkbox"/> No								
7.	The student was observed in the learning environment, including the general classroom setting, to document the student's academic performance and behavior in the areas of difficulty. An observation summary/report is attached and describes any relevant behavior noted during the observation, and the relationship of that behavior to the student's academic functioning.	<input type="checkbox"/> Yes <input type="checkbox"/> No								

8. The specific instructional strategies used and the student-centered data collected are documented and available in the Eligibility Committee Report.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Note any educationally relevant medical findings. Write N/A if no relevant medical findings apply:	

The Eligibility Committee used the above evaluation data analysis and discussion to determine:

- The student **DOES** meet the eligibility criteria for a specific learning disability that adversely impacts his/her education and **is eligible** for special education and related services.
- The student **DOES NOT** meet the eligibility criteria for a specific learning disability and **is not eligible** for special education and related services as a student with a specific learning disability.

The student's parent was notified about the following: The State's policy (i.e., Policy 2419 including Multi-Tiered System of Supports) regarding the amount and nature of student performance data that would be collected and the general education services that would be provided; strategies for increasing the student's rate of learning; results of repeated assessments of student progress AND the parent's right to request an evaluation at any time throughout the Multi-Tiered System of Supports process.

Date of parent notification: _____

Eligibility Committee Members

Signature	Position	Agreement with EC Determination
_____	Chairperson	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Evaluator/Specialist	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Teacher	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Parent	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Student	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	Other	<input type="checkbox"/> Yes <input type="checkbox"/> No

NOTE: Any member(s) with dissenting opinions must submit a separate statement presenting the member's conclusions.

Meeting Notes (optional)

Note: Dyslexia and dyscalculia are conditions that may be considered under the specific learning disability category, and their definitions are consistent with IDEA and state board policy.

Dyslexia is an alternative term used to refer to a pattern of learning difficulties characterized by problems with accurate or fluent word recognition, poor decoding, and poor spelling abilities. If dyslexia is used to specify this particular pattern of difficulties, it is important also to specify any additional difficulties that are present, such as difficulties with reading comprehension or math reasoning; and

Dyscalculia is an alternative term used to refer to a pattern of learning difficulties characterized by problems processing numerical information, learning arithmetic facts, and performing accurate or fluent calculations. If dyscalculia is used to specify this particular pattern of mathematic difficulties, it is important also to specify any additional difficulties that are present, such as difficulties with math reasoning or word reasoning accuracy.

(W. Va. Code §18-20-10)