

# Records Review Summary

Student: \_\_\_\_\_ Date of Review: \_\_\_\_\_

Person Completing Review: \_\_\_\_\_

**Place an "X" in the box indicating the documents that were available for review and write down any significant information from the review of each.**

Office Discipline Referrals and Disciplinary Records \_\_\_\_\_

IDENTIFY PATTERNS (ANTECEDENTS → Location? Time? Persons involved?) \_\_\_\_\_

IDENTIFY PATTERNS (CONSEQUENCES → Motivation? Admin. Decision?) \_\_\_\_\_

---

---

---

Data and documentation from previous Behavioral Interventions (Check-In/Check-Out, etc.) \_\_\_\_\_

---

---

---

Past Behavior Support Plans and Behavioral Assessments (FBA, etc.) \_\_\_\_\_

---

---

---

Attendance \_\_\_\_\_

---

---

---

Individualized Education Plan (IEP) \_\_\_\_\_

---

---

---

Academic Assessment Results and Records (CBM, DIBELS, grades, etc.) \_\_\_\_\_

---

---

---

Medical Records/ Health History \_\_\_\_\_

---

---

---

Other \_\_\_\_\_

---

---

---