

INDEPENDENT SCHOOL DISTRICT 196  
Rosemount-Apple Valley-Eagan, Minnesota  
Educating our students to reach their full potential

Series Number 602.6.1.5P Adopted November 1981 Revised September 2008

Title Report of Data Collection for Consideration of Grade Acceleration

Student's name \_\_\_\_\_ Date of birth \_\_\_\_\_ C.A. \_\_\_\_\_  
yr/mth

School \_\_\_\_\_ Grade \_\_\_\_\_

Name of parent(s)/guardian(s) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

.....  
.....  
Individual Intellectual Ability Test – Must have been completed within two years.  
(The Slossen is not an approved measure.)

Name of test:

Results:

Assessment completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
.....  
.....

Name of test: Woodcock Johnson Achievement Test (scored for aptitude)

Results:

Total Reading Percentile: \_\_\_\_\_

Total Math Percentile: \_\_\_\_\_

Written Language Percentile: \_\_\_\_\_

Assessment completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
.....  
.....

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Name of test: Woodcock Johnson Achievement Test (scored for achievement)  
Results:

Total Reading Percentile: \_\_\_\_\_

Total Math Percentile: \_\_\_\_\_

Written Language Percentile: \_\_\_\_\_

Assessment completed by: \_\_\_\_\_ Date: \_\_\_\_\_

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Critical Questions:

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| A. Has the student been grade accelerated previously?<br>(including early entrance) | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Does the student want to be considered for grade acceleration?                   | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Will a sibling be in the same grade if the student is grade advanced?            | <input type="checkbox"/> | <input type="checkbox"/> |

Assessment completed by: \_\_\_\_\_ Date: \_\_\_\_\_

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Observation report by classroom teacher:

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

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Observation report by other teacher(s):

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

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c: case studies file