

SIMI VALLEY ADULT SCHOOL
1880 Blackstock Street
Simi Valley, CA 93065
(805) 579-6200

PROJECT HELP
STUDENT REFERRAL FORM

Dear Teacher, please complete this form and have the student's parent bring it to Simi Valley Adult School and Career Institute. Parents can register by picking up registration packets in the Counseling Office, Room 402.

REFERRING SCHOOL INFORMATION

Student's Name _____ Grade: _____

Referring School: _____ School Phone: _____

Referring Instructor: _____ Date: _____

Please mark area(s) of remediation desired:

_____ **INITIAL READING: Develops early reading skills. Levels: 1.0 – 2.99**
Student's current proficiency grade level _____

_____ **READER'S WORKSHOP: Develops reading comprehension and vocabulary skills. Levels 2.8 – 7.5**
Student's current reading proficiency grade level _____

_____ **SPELLING SKILLS: Develops spelling skills. Levels 2.0 – 8.9**
Student's current proficiency grade level _____

_____ **MATH CONCEPTS & SKILLS: Builds on a set of 16 content skills. Levels 0.0 – 8.99**
Student's current math proficiency grade level _____

Comments:
