



# Elementary Teacher Report for IEP Team Meetings

Office of the Deputy Superintendent of Schools  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

**MCPS Form 272-7**  
**December 2008**  
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Student \_\_\_\_\_ Student ID \_\_\_\_\_

Subject \_\_\_\_\_ Teacher \_\_\_\_\_

Case Manager \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Return by \_\_\_\_/\_\_\_\_/\_\_\_\_

## READING

Student is (please check one):

- Above Grade Level    On Grade Level    Below Grade Level

	Strength	Satisfactory	Concern
Reads orally in class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands class readings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reads similarly to others in class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## WRITTEN LANGUAGE

Student is (please check one):

- Above Grade Level    On Grade Level    Below Grade Level

	Grade	Title
Grades and titles of at least three writing samples		

	Strength	Satisfactory	Concern
Spelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handwriting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grammar/usage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**CONTINUED**

**MATH**

Student is (please check one):  Above Grade Level  On Grade Level  Below Grade Level

	Grade	Title
Grades and titles of at least three unit assessments		

	Strength	Satisfactory	Concern
Basic facts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calculation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**ORAL COMMUNICATION**

	Strength	Satisfactory	Concern
Understands information presented orally (classroom discussion, narratives)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands class readings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaks in complete sentences to express ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaks clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**ORGANIZATION**

	Strength	Satisfactory	Concern
Materials organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assignment completion by due date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrives with necessary materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brings necessary materials home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PARTICIPATION**

	<b>Strength</b>	<b>Satisfactory</b>	<b>Concern</b>
Participates during class discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrains from socializing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focuses on teacher/activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SOCIAL/EMOTIONAL**

	<b>Strength</b>	<b>Satisfactory</b>	<b>Concern</b>
Appropriate interactions with staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate interactions with students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem solves when stressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raises hand/waits to be called on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments (mandatory if any area is a concern):