**SPECIFIC LEARNING DISABILTY RTI WORKSHEET**

**Determination of Disability:** (Student’s name) meets special education eligibility under the category of Specific Learning Disability in the area of (list one or more of eight LD areas) using the response to intervention (RTI) model, which has a significant impact on (Student’s name) educational performance.

**Qualifying Criteria:**

(Student’s name) does not make sufficient progress to meet age or State approved grade-level standards when using a process based on the child’s response to scientific, research-based intervention (Rate of Progress, Achievement Level, and Educational Need must ALL be answered ‘yes’ to meet eligibility criteria):

Is (Student’s name) RATE OF PROGRESS, when given research-based intervention over time, significantly slower than expected or does the individual maintain expected progress only with greater resources than general educational alone in the areas of concern?

[ ] Yes (list area(s) and provide rate of progress data) (thorough description written in IWAR)

[ ] No (list area(s))

Is (Student’s name) ACADEMIC ACHIEVEMENT LEVEL significantly below expectations when compared to grade level peers in the area(s) of concern?

[ ] Yes (list area(s) and provide discrepancy data) (thorough description written in IWAR)

[ ] No (list area(s))

Does (Student’s name) EDUCATIONAL NEED require services and support that extends beyond what typical general education resources alone can provide?

[ ] Yes (list area(s) and provide resources used to determine need) (thorough description in IWAR)

[ ] No (list area(s))

**Adverse Impact on Educational Performance:**

[ ] The impact of the disability requires specialized instruction as it has an adverse impact on educational performance and is not able to be provided by general education.

**Data for Determining Eligibility was gathered from** (List multiple resources; Not all may apply):

[ ] Cumulative file review

[ ] Review of previous interventions

[ ] Interview Information (Teacher, Parent, Student)

[ ] Observation(s) (e.g., classroom, large group, small group, etc.) Date \_\_\_\_\_\_\_\_

[ ] Tests (CBM, CBE, MAP, NDSA, Intelligence Tests, Achievement Tests, etc.)

[ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: A minimum of one observation in area of disability required (best practice would be three observations)