

**Illinois Statewide Technical Assistance Center (ISTAC)
Systematic Information Management for Educational Outcomes (SIMEO)
Educational Information Tool (EI-T)**

1) Facilitator is REQUIRED to complete the following tracking information every time data are collected:

Time 1/Baseline Collected no later than 30 days from referral and before first meeting	Time 2 Collected anywhere from a maximum of monthly from the point of initial assessment to a minimum of once at three months following initial assessment, or before the school year ends	Time 3 Collected anywhere from a maximum of monthly from the point of Time 2 assessment to a minimum of once at six months following initial assessment, or before the school year ends	Time 4 Collected anywhere from a maximum of monthly from the point of Time 3 assessment to a minimum of once at 9 months after initial meeting, or before the school year ends
Date completed	Anticipated date to complete	Anticipated date to complete	Anticipated date to complete
	Actual date completed	Actual date completed	Actual date completed

How to complete this form:

- Classroom teacher or lead teacher for student completes the form
- If more than one teacher is involved in the classroom functioning evaluation, see group scoring options
- Answers to the survey should reflect the teacher(s) experience with youth over the last three months

2) Student Name: _____ 3) Student ID: _____

4) Please identify the period of assessment:

___Time 1/Baseline___Time 2___Time 3___Time 4___Time 5___Time 6___Time 7___Time 8___Discharge

5) This tool was filled out by: an individual teacher a team of teachers

6) Please check if you are a ... general education teacher special education teacher
 other (please specify) _____

7) How well do you know this child? Not Well Moderately Well Very Well

8) Has this student transferred during the past year (circle all that apply)? School _____ District _____ N/A

9) Is this student attending the school they would attend if they did not have a disability (please circle)? YES NO N/A

CLASSROOM FUNCTIONING

Never= Display of this functional behavior never occurs

Sometimes= Display of this functional behavior occurs less than one time per week

Often=Display of this functional behavior occurs between one to four times a

Always= Display of this functional behavior occurs daily or more than one time per day

SECTION I Based on your expectations of children in your classroom, please indicate the extent to which the above student...	Never	Sometimes	Frequently	Always	Not Applicable
10) Attends school	1	2	3	4	N/A
11) Completes class assignments on time	1	2	3	4	N/A
12) Works independently	1	2	3	4	N/A
13) Completes homework on time	1	2	3	4	N/A
14) Passes quizzes and tests	1	2	3	4	N/A
15) Completes subjects with a passing grade	1	2	3	4	N/A
16) Participates in classroom discussions and activities	1	2	3	4	N/A
17) Pays attention in class	1	2	3	4	N/A
18) Participates in extracurricular activities	1	2	3	4	N/A
19) Has friends	1	2	3	4	N/A
20) Engages in socially appropriate behavior with peers	1	2	3	4	N/A
21) Engages in socially appropriate behavior in unsupervised settings	1	2	3	4	N/A
22) Engages in appropriate classroom behavior with adults	1	2	3	4	N/A

SECTION II:	Never	Sometimes	Frequently	Always	Not Applicable
23) Student follows same routine as other students	1	2	3	4	N/A
24) Student participates in lessons that are differentiated for all students through out the day.	1	2	3	4	N/A

CLASSROOM FUNCTIONING (CONT.)

SECTION II (CONT.):	Never	Sometimes	Frequently	Always	Not Applicable
25) Student participates with same age peers without disabilities in non-academic classes throughout the school day.	1	2	3	4	N/A
26) The student is given individual accommodations to meet his/her learning needs.	1	2	3	4	N/A
27) Interactions between student and regular education teacher occurs at frequencies similar to other students in the classroom.	1	2	3	4	N/A
28) Student has individual daily schedule visible (if needed).	1	2	3	4	NA
29) Student has a system for communicating with peers and adults, across settings, throughout the school day.	1	2	3	4	NA
30) Student's work is monitored for progress and understanding during activities.	1	2	3	4	NA
31) Student follows directions independently.	1	2	3	4	NA
32) Student follows directions with supports.	1	2	3	4	NA
33) Student completes work independently.	1	2	3	4	NA
34) Student completes work with supports.	1	2	3	4	NA
35) Student transitions between activities and environments independently.	1	2	3	4	NA
36) Student transitions between activities and environments with supports.	1	2	3	4	NA

- 37) Youth needs academic assistance in excess of the assistance expected with classroom instruction (*please circle*). **YES** **NO**
- 38) This youth needs behavioral interventions beyond the classroom routine (*please circle*). **YES** **NO**

ACADEMIC PERFORMANCE

- 39) Has student repeated a grade (*please circle*)? **YES** **NO**
- 40) Is child's overall performance commensurate with his/her ability (*please circle*)? **YES** **NO**
- 41) Please rate the student's academic performance (*circle one*):
- | | | | | |
|-------------------------------|--------------------------------------|--------------------------------|---------------------------------------|------------|
| Failing
(GPA 0-59%) | Below Average
(GPA 60-69%) | Average
(GPA 70-79%) | Above Average
(GPA 80-100%) | N/A |
|-------------------------------|--------------------------------------|--------------------------------|---------------------------------------|------------|
- 42) Please rate the student level of goal completion per the IEP(IF APPLICABLE):
- | | | | | | |
|-------|--------|--------|--------|---------|-----|
| 0-20% | 21-40% | 41-60% | 61-80% | 81-100% | N/A |
|-------|--------|--------|--------|---------|-----|
- 43) Number of students in your class _____
- 44) How often is this student in your classroom (*please circle*)?
- | | | | |
|-------|--------------------|-------------|-----------------------|
| Daily | 2-3 times per week | Once a week | Less than once a week |
|-------|--------------------|-------------|-----------------------|