



REQUEST FOR AN AD HOC COMMITTEE MEETING/STUDENT IDENTIFICATION:

Student Name:		School:	
		Grade:	
To (Administrator):		Date:	
From (Teacher):			
Does the student have a confidential file? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, did you read the recommendations? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Read:	

Request for an Ad Hoc Committee Meeting/Student Identification: In accordance with 8-9.06 a) c) and 8-9.08 of the Provincial Agreement, I am informing you that, in my opinion, the above-mentioned student is demonstrating the following problem(s):

Timeline and Interventions/Teaching Strategies Carried Out (check all that apply)

From: _____ **To:** _____

- Environment** (Preferential seating, small group, etc.)
- Materials** (Manipulatives, calculator, graphic organizer, etc.)
- Assignments** (Reader, scribe, extended time, etc.)
- Instruction** (Simplified instructions, frequent feedback, provided lesson notes in advance, etc.)
- Behaviour** (Positive reinforcement, frequent breaks, clearly defined limits/expectations, etc.)
- Global Development – Preschool** (Direct actions: intervening using gestures, verbal, or visual cues/Indirect actions: rearranging learning space, materials, activities, or time, etc.)
- Other (Please specify)**

Support Services Requested:

- Psychology** **Speech-Language Pathology** **Occupational Therapy** **Social Worker**

Elementary Remedial/High School Supporting Teacher **Other:** _____

- In accordance with 8-9.08 of the Provincial Agreement, I am requesting that an Ad Hoc Committee be convened within 15 working days of receiving this form to further study and monitor this case.

_____ **Teacher Signature**

PLEASE KEEP A COPY OF THIS REQUEST FOR YOUR FILES