

**SPECIAL EDUCATION DEPARTMENT  
WENATCHEE SCHOOL DISTRICT**

**TELEPHONE QUESTIONNAIRE  
TRANSFER STUDENT DATA SHEET**

**NAME OF STUDENT:** \_\_\_\_\_ **B.D.:** \_\_\_\_\_

**PREVIOUS SCHOOL:** \_\_\_\_\_ **CITY/STATE** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**PERSON WHO GAVE INFO:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_

**NAME OF IEP TEACHER:** \_\_\_\_\_

**WHAT IS THE BEST TIME TO CALL IEP TEACHER?** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**1) DATE OF LAST EVALUATION:** \_\_\_\_\_ **DIAGNOSTIC CATEGORY:** \_\_\_\_\_

**2) DATE OF LAST IEP:** \_\_\_\_\_

**3) ELIGIBLE FOR SERVICES IN WHICH DEFICIT AREAS?**

<b>READING</b>	_____	<b>AMOUNT OF TIME</b>	_____	<b>(DAY/WEEK)</b>
<b>WRITTEN LANG</b>	_____	<b>AMOUNT OF TIME</b>	_____	<b>(DAY/WEEK)</b>
<b>MATH</b>	_____	<b>AMOUNT OF TIME</b>	_____	<b>(DAY/WEEK)</b>
<b>OTHER</b>	_____	<b>AMOUNT OF TIME</b>	_____	<b>(DAY/WEEK)</b>

**4) CHILD IS WORKING AT WHAT GRADE LEVEL ACADEMICALLY:**

**READING:** \_\_\_\_\_

**MATH:** \_\_\_\_\_

**OTHER:** \_\_\_\_\_

**5) GRADE LEVEL OF MAINSTREAM HOMEROOM:** \_\_\_\_\_

**6) HAS STUDENT BEEN EXPELLED?** \_\_\_\_\_

**7) DOES STUDENT HAVE A BEHAVIOR PLAN? \_\_\_\_\_ DISCIPLINE RECORDS?** \_\_\_\_\_

\_\_\_\_\_  
**INTERVIEWER**

\_\_\_\_\_  
**DATE**