

STUDENT ASSISTANCE TEAM (SAT LOG)

Name of School: _____

School Term: 20__ - ____

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Student's Full Name (First, MI, Last) & Birthdate	Date Referral Received	WVEIS #	Grade	Sex (Male, Female)	Race Code* (1, 2, 3, 4, 5, 6)	Reason for Referral (Academic Difficulty, Academic Excellence, Behavior, Etc.)	Previously Retained (Yes, No)	Initial Meeting				
								Date	Parent Attended <small>(KEY) In Person:.....IP Alternate Means:.....AM Did Not Attend:.....NO</small>	MTSS documentation provided/reviewed (Circle All That Apply)	Decision Code ** (1, 2, 3, 4, 5)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	
										(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)	

**** Decision Code**

1) Interventions Developed	4) Close Case
2) Continue Interventions	5) Other—Specify
3) Refer to Special Education	

*** Race Code**

1) White	4) American Indian
2) African American	5) Asian/American Pacific
3) Hispanic	6) Other - - Specify

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Student's Initials	REVIEW MEETING # 1				REVIEW MEETING # 2				ELIGIBILITY MEETING		
	Date	Parent Attended <small>(KEY) In Person:.....IP Alternate Means:..AM Did Not Attend:..NO</small>	MTSS documentation provided/reviewed (Circle All That Apply)	Decision Code** (1, 2, 3, 4, 5)	Date	Parent Attended <small>(KEY) In Person:.....IP Alternate Means:..AM Did Not Attend:..NO</small>	MTSS documentation provided/reviewed (Circle All That Apply)	Decision Code** (1, 2, 3, 4, 5)	Date	Parent Attended <small>(KEY) In Person:.....IP Alternate Means:..AM Did Not Attend:..NO</small>	Outcome <small>Continue Interventions.....1 Eligible for IEP.....2 Eligible for 504.....3</small>
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	
		(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	(ELA) (MATH) (BEHAVIOR)			(IP) (AM) (NO)	

I verify that the above information is accurate _____
Administrator's Signature

_____ Date