



Principal's Checklist for MET Meeting Consideration

Student Name: _____

Teacher (s): _____

I Grade: _____

In addition to the information below, to determine how the student's behavior and/or academic progress compares to that of peers, Universal Screener Results and CLASSROOM COMPARISON CHARTS must be available and reviewed: I-Ready, STAR, DRAs, Behavior Screener, Benchmark Tests.

Academic			
Has student been retained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes list grade(s):	
Is student currently receiving Tier 2 Academic Intervention support (progress monitoring must be provided)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Weeks in Tier 2:	
Is student currently receiving Tier 3 Academic Intervention support (progress monitoring must be provided)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Weeks in Tier 3:	
Classroom Grades:		I	
How often is student allowed to retake tests?			
Benchmark assessment:			
Attendance: <input type="checkbox"/> Regular <input type="checkbox"/> Excessive Tardiness <input type="checkbox"/> Excessive Absenteeism			
Behavior			
Is student currently receiving Tier 2 Behavior Intervention support (progress monitoring must be provided)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Weeks in Tier 2:	
Is student currently receiving Tier 3 Behavior Intervention support (progress monitoring must be provided)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Weeks in Tier 3:	
Is there medical documentation to support Behavior Intervention?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diagnosis:	
Medical Records Requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	Medical Records Received? <input type="checkbox"/> Yes <input type="checkbox"/> No		