***CHERRYFIELD ELEMENTARY SCHOOL***

***NEPN/NSBA CODE: IHBAJ-E***

**PROGRESS REPORT FORM**

Date: School:

Student’s Town Responsible

Name: for Student:

Address: Send to Attention of:

**Fill Out Relevant Portion**

A. January Progress June Progress

 No concerns at this point

 The following concerns (academic/special) exist:

Please attach a copy of this semester’s rank card.

B. Concerns with the student:

 Transferred to another school. Date:

 Moved to another town. Date:

 Has been absent for more than 10 days. Dates of absence:

 Has been removed for disciplinary reasons. Date:

 Referred to an alternative program.

 Referred to Student Assistance Team.

 Has been referred by staff or parent/guardian for consideration as a possible special needs student.

 Other

 Summary of action to be taken in response to concerns:

DATE ADOPTED: August 11, 2015

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