



Corning Union Elementary School District

1590 South Street, Corning, CA 96021

530.824.7700 ~ 530.824.2493 Fax

Preparing Students For Their Future!

www.corningelementary.org

Request for Assistant

Student's Name: _____ **Grade:** _____ **Date:** _____

Teacher / Team: _____ **IEP:** **Yes** **No** (caution)

Please identify the student's strengths.

(Some possible strengths include: academic interests, social skills, hobbies, sports, etc.)

1. _____ 2. _____
3. _____ 4. _____

Problem Behaviors: (Please check all areas of concern)

Verbally Harasses Others

Disrupts Class Activities

Noncompliant

Difficulty Completing Work

Withdrawn

Tardy / Attendance

Inattentive

Other: _____

Academic Concerns:

All Academic Areas

Math

Reading

Writing

Study Skills

Organization

Homework

Why do you believe this student is engaging in problem behavior?

(Please check primary function if known)

Adult Attention

Peer Attention

Escape from difficult work / tasks

Escape from adult / peer attention

Gain access to preferred activity / item