

Evaluation Form

Student:	STAR Reading ID: Grade:		Age:
Date:	Date of last screener (if any):		
Assessor:	Recommendation during last screener:		

1) Initial	Interview
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Areas of Strength:		
Areas for Improvement:		
Extra Information Gained:		

2) Phonics Screener

	ABC Names, ABC Sounds, CVC Blending, & Sight Words Score /62 (P=49)			49) Total	
1st	Task 1-2	Task 3-4	Task 5-6	Task 7-8	PASS=60
	/22	/24	/24		/30 /100
	Word Families of Short V	Nord Families of Short Vowels, Long Vowels (Magic -e), & Sight Words Score /34 (P=27)			=27) Total
2nd	Task 1-2	Task 3-4	Task 5-6	Task 7-8	PASS=48
	/21	/21	/19		/19 /80
	Consonants Blends/ Final Blends, Soft/Silent Letters, & Sight Words Score /45 (P=36)			=36) Total	
3rd	Task 1-2	Task 3-4	Task 5-6	Task 7-8	PASS=48
	/21	/19	/21		/19 /80
	Diphthongs, Vowel Diagraphs, Short/Long Vowels, R-controls, & Sight Words Score /40 (P=32)				:32) Total
4th	Task 1-2	Task 3-4	Task 5-6	Task 7-8	PASS=36
	/16	/14	/14		/16 /60
	Comprehension Questions				
	Q1: a) b) c)	d) Q2: a) b) c) d) Q3 :	a) b) c) d)	/3
	Q4:				

3) STAR Reading Comprehension Test

GE Level (Grade Equivalent Level):	Time Taken:
IRL (Instructional Reading Level):	Practice Questions Answered:
ZPD Range (Zone of Proximal Development):	

4) Course Recommendation 推荐课程

Primary Recommendation:	
Reasons for Recommendation:	
Secondary Recommendation(s) (if applicable):	
Reasons for Recommendation(s):	