

**SUMMER READING & WRITING SOCIETY**  
**2024 SUMMER ACADEMIC INFORMATION FORM**  
**Teacher Form**

**Registration Deadline: Monday, June 10<sup>th</sup>, 2024**

The child's teacher must complete this form in its entirety. The information on this form will be used to determine eligibility in the program. Partially completed forms will not be accepted. The teacher should submit this form directly to CLaRI's Associate Director, Ashlee Campbell.

716-645-1058 (Phone) / 716-645-5060 (Fax) / [ashleeb@buffalo.edu](mailto:ashleeb@buffalo.edu)

**Child's Name:** \_\_\_\_\_

School Name: \_\_\_\_\_ Grade Entering in Fall: \_\_\_\_\_

Type of Class: ☐ Regular ☐ Special Education ☐ Other: (please specify) \_\_\_\_\_

**Background**

1. Is the child experiencing difficulties in reading and/or writing? Yes No

2. **What is the child's current reading level:**

\_\_\_\_\_

3. **What is the child's current writing level:**

\_\_\_\_\_

4. **What is the child's current spelling level:**

\_\_\_\_\_

5. What types of books, titles, or authors does the child enjoy reading: (e.g., informational books, narrative stories, mysteries, comics, poetry).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Please describe this child’s strengths and areas in need of development for each of the following literacy areas:

	Strengths	Areas-of-Development
Fluency (i.e., decoding, sight words, automaticity, prosody)		
Comprehension		
Spelling		
Writing		

9. Does this child have any special academic needs? (e.g., ADHD, Autism, IEP, 504)

\*please a copy of any educational documents, such as the IEP or 504 plan.

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10. Is there anything else we should know about this child's academic development?

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### **Related Factors**

1. Does the child have any speech difficulties? \_\_\_\_\_

If so, what is the nature of these difficulties? \_\_\_\_\_

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Has the child received help from a speech pathologist? \_\_\_\_\_

### **We would greatly appreciate any supplemental information. If possible, please attach:**

- Samples of the student's written work demonstrating the developmental nature of the child's writing ability.
- Reports of standardized test results.

Name(s) of person completing this information form: \_\_\_\_\_

Date \_\_\_\_\_ Position \_\_\_\_\_

**Completed forms will need to be uploaded to the CLARI secure box folder <https://buffalo.app.box.com/f/b8b383b9cd974a95b1c5c90038b2c0cd>. Label the document with your child's first and last name and title of the form. Do not email or fax registration forms, they will not be accepted.**