



SCHOOL PROFILE INFORMATION

Date of Report _____ District _____

Contact Information	
Name of school:	Telephone:
Address:	Fax:
Administrative contact:	Telephone:
	Email:
Coach:	Telephone:
	Email:

Type of School (please circle)					
Pre K	Elementary	Middle	High	Alt/Ctr	Other _____

Student Enrollment by Race/Ethnicity							
American Indian	Asian	Black	Hispanic	Multiracial	White	Other	Total Enrollment



Student Enrollment by Need	
Number With IEP	Percent On Free/Reduced Lunch

Initiatives in Place (circle all that apply)			
School-wide Initiatives			
Title One	Reading First	Problem-Solving Model/RTI	Other: _____
Tier 2: Supplemental Interventions <input type="checkbox"/> yes <input type="checkbox"/> no		Tier 3: Intensive Interventions <input type="checkbox"/> yes <input type="checkbox"/> no	
BEP I Can Problem Solve Skillstreaming Prepare	Steps to Respect Second Step School Connect Other _____	ERASE PTR Other _____	Other _____

Data Systems	
Academic data system(s) (i.e., FAIR)	Behavior data system(s) (i.e., SWIS, Genesis, Terms)

Enter