

# SIMEO II Student Enrollment Tool

Illinois Statewide Technical Assistance Center (ISTAC)  
Systematic Information Management for Educational Outcomes (SIMEO)

<b>Time 1/Baseline Entered at Baseline</b>	<b>Any time after baseline</b> Update and save any changes so enrollment information on student is current		
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Use the below information to complete the student enrollment in SIMEO II

## Standard Student Info

- 1) Date tool completed: \_\_\_\_\_ 2) Student name: \_\_\_\_\_  
3) Student ID: \_\_\_\_\_ 4) Gender: \_\_\_\_\_ 5) Date of birth: \_\_\_\_\_  
6) Student primary language:  
 English  Spanish  Chinese  French  German  American Sign Language  Other: \_\_\_\_\_

## School Info

- 7) School name: \_\_\_\_\_ 8) Tier 3 facilitator name: \_\_\_\_\_  
9) Facilitator role:  
 Parent  Special Ed Director  TA Specialist  Agency Social Worker  Teacher  Case Manager  
 PBIS Coach  Behavior Consultant  Principal  Resource Teacher  School Social Worker  
 Therapist  Coordinator/Team Member  School Psychologist  Family Focus Facilitator (IATTAP)  Other  
10) Facilitator 2: \_\_\_\_\_  
11) Facilitator 2 role:  
 Parent  Special Ed Director  TA Specialist  Agency Social Worker  Teacher  Case Manager  
 PBIS Coach  Behavior Consultant  Principal  Resource Teacher  School Social Worker  
 Therapist  Coordinator/Team Member  School Psychologist  Family Focus Facilitator (IATTAP)  Other  
12) Primary teacher: \_\_\_\_\_ 13) Additional teacher: \_\_\_\_\_

## Referral

- 14) Date student enrolled in PBIS Tier 3: \_\_\_\_\_ 15) Name of referral source: \_\_\_\_\_  
16) Role of referral source:  
 Parent  Special Ed Director  TA Specialist  Agency Social Worker  Teacher  Case Manager  
 PBIS Coach  Behavior Consultant  Principal  Resource Teacher  School Social Worker  
 Therapist  Coordinator/Team Member  School Psychologist  Other: \_\_\_\_\_  
17) Date of initial parent conversation: \_\_\_\_\_ 18) Date of First Team Meeting: \_\_\_\_\_

## Student Demographics

- 19) Primary initiative:  CHOICES  IATTAP  ISRC  PBIS  
20) Secondary initiative:  CHOICES  IATTAP  ISRC  PBIS  
21) Current grade of student:  
 Pre-K  Kindergarten  0-3 Services  1st  2nd  3rd  4th  5th  6th  7th  8th  
 9th  10th  11th  12th  Post-12 Transition  Homeschooling

22) Special education identified: Y / N

23) Primary disability:

- Mental Retardation    Visual Impairment    Deafness    Other Health Impairment    Autism
- Orthopedic Impairment    Hearing Impairment    Speech and/or Language Impairment
- Multiple Disabilities    Traumatic Brain Injury    Specific Learning Disability    Deaf-Blind
- Emotional Disturbance    Developmental Delay    504 Plan

24) Secondary disability:

- Mental Retardation    Visual Impairment    Deafness    Other Health Impairment    Autism
- Orthopedic Impairment    Hearing Impairment    Speech and/or Language Impairment
- Multiple Disabilities    Traumatic Brain Injury    Specific Learning Disability    Deaf-Blind
- Emotional Disturbance    Developmental Delay    504 Plan

25) Current education placement:

- General ed. classroom 100% of the day - FACTS Code 01
- General ed. classroom with special ed. consultation - FACTS Code 01
- General ed. classroom with inclusion support - FACTS Code 01
- Special ed. instruction and/or related services 1-20% of the day OUTSIDE the general ed. classroom - FACTS Code 01
- Special ed. instruction and/or related services 21-60% of the day OUTSIDE the general ed. classroom - FACTS Code 02
- Special ed. instruction and/or related services more than 60% of the day OUTSIDE general ed. - FACTS Code 03
- Special ed. 100% in a separate public day school - FACTS Code 04
- Special ed. 100% in a separate public day school in conjunction with a separate residential component - FACTS Code 05
- County or municipal detention center or jail - FACTS Code 07
- IYC – Jail-FACTS Code 07
- Private day school - FACTS Code 08
- Private residential - FACTS Code 09
- Alternative education setting
- Homebound - FACTS Code 11
- Hospital - FACTS Code 12
- Regular education Pre-school
- Special education Pre-school/Early Childhood
- Community Child Care
- Partial day school
- Education Placement did not change

26) Primary caregivers relationship to student:

- Mother    Father    Grandparent    Step-parent    Foster Parent    Two Parents    Other Relative
- Other: \_\_\_\_\_

27) Student's race:

- Asian    African American    Bi-racial    Caucasian    Hispanic/Latino    Other: \_\_\_\_\_

**LAN**

28) Student's LAN number: \_\_\_\_\_

29) Has this student been referred for support through this LAN?   Y / N

30) If yes, have flex funds been requested from the LAN?   Y / N