

Calcal Ana Doutfalia Eila Chaolaist						
School-Age Portfolio File Checklist						
Child's Name:		1	Birthdate:			
			L			
Start Date:						
Sections in red indicate SUTQ requirements						
Sections in red indicate SOTQ requirements						
Section 1: Background Information						
Se	Date when added					
Getting to Know Y						
IFSP/IEP/504 Plan (if applicable)						
Section II. Formal Assessment/Deport Card (nevent signature required)						
Section II: Formal Assessment/Report Card (parent signature required) Dates						
October:						
February:						
May:						
1124)						
Section III: Developmental and Educational Goals						
Source of Evidence (within 30 days)		Dates				
Developmental and Educational Goals for SUTQ						
(JFS 1514)						
Section IV: Informal Assessments (Anecdotal Records)						
Source of Evidence				Date		
Child Observation Note-Taking Record (circle when		Jan	Feb	Mar	Apr	
month is completed)		May	Jun	Jul	Aug	
		Sept	Oct	Nov	Dec	
DELD 1 . 1 (10 11 11)						
RTI Behavior Log (if applicable)						
Section V: Child Work Samples (Art, Writing, Dictation, Photos, Evidence of Family Partnerships)						
1 / 9/		Jan	Feb	Mar	Apr	
Circle when month is completed.		May	Jun	Jul	Aug	
	•	Sept	Oct	Nov	Dec	