

# Ua Ntaub Ntawv rau Kev Kuaj Xyuas Me Nyuam Thaum Ntxov

**TEJ XOY XWM LUAM THIAB LUS QHIA:** Tus me nyuam niam txiv/neej saib xyuas yuav tsum ua phab ntawv ib rau daim ntawv no. Tus neeg khiav hauj lwm rau cheeb tsam tsev kawm ntawv yuav ua phab ntawv ob. Thov luam ntawv los sis ua ntawv hauv hluav taws xob.

**Tus Me Nyuam Npe Raws Txoj Cai (Npe, Npe Nruab Nrab, Lub Xeem):** \_\_\_\_\_

**Tus Me Nyuam Lwm Lub Npe uas Nws Siv (Npe, Npe Nruab Nrab, Lub Xeem):** \_\_\_\_\_

**Tus Me Nyuam Hnub Yug:** \_\_\_\_\_ **Poj niam los txiv neej:** Txiv neej \_\_\_\_\_ **Poj niam** \_\_\_\_\_

**Niam Txiv/Neeg Saib Xyuas:** \_\_\_\_\_ **Xov tooj:** \_\_\_\_\_ **Lub P.O. Box:** \_\_\_\_\_

**Chaw nyob:** \_\_\_\_\_

**Nroog:** \_\_\_\_\_ **Xeev:** \_\_\_\_\_ **Zauv cheeb tsam:** \_\_\_\_\_

**Niam Txiv/Neeg Saib Xyuas:** \_\_\_\_\_ **Xov tooj:** \_\_\_\_\_ **Lub P.O. Box:** \_\_\_\_\_

**Chaw nyob:** \_\_\_\_\_

**Nroog:** \_\_\_\_\_ **Xeev:** \_\_\_\_\_ **Zauv cheeb tsam:** \_\_\_\_\_

**Thov teb lub xeev lo lus nug txog haiv neeg/hom neeg nram qab no: Neeg Qhab Asmeskas: Ib tug neeg uas muaj caj ceg ntawm cov neeg uas ib txwm nyob hauv Asmeskas Sab Qaum Teb thiab ua kab lig kev cai raws li pawg neeg ntawd los sis raws li koog zej zog ntawd pom zoo ua. (xaiv IB qho)**

\_\_\_\_\_ TSIS YOG, tsis tau yog Neeg Qhab Asmeskas

\_\_\_\_\_ YOG, Neeg Qhab Asmeskas

**Thov teb tuam tsoom fww lo lus nug txog haiv neeg/hom neeg nram qab no. Koj muaj cai xaiv ntau tshaj ib lo lus teb hauv Kem Ntawv B. Saib sab saum toj phab ntawv ob seb yuav teb cov lus hauv kem ntawv no li cas.**

**\*Kem Ntawv A – Tus me nyuam puas yog neeg neeg Mev/Neeg Mev Latino? (xaiv IB qho)**

\_\_\_\_\_ TSIS YOG, tsis tau yog Neeg Mev/Neeg Mev Latino

\_\_\_\_\_ YOG, Neeg Mev/Neeg Mev Latino

**\*Kem Ntawv B – Koj tus me nyuam yog haiv neeg dab tsi? (xaiv txhua qhov uas qhia txog nws)**

\_\_\_\_\_ Neeg Qhab Asmeskas/Neeg Xeeb Txawm Nyob Teb Chaws Alaska

\_\_\_\_\_ Neeg Esxias

\_\_\_\_\_ Neeg Dub/Neeg Asmeskas Dub

\_\_\_\_\_ Native Hawaiian/Pacific Islander

\_\_\_\_\_ Neeg Dawb

## TEJ XOY XWM TXOG THAWJ YAM LUS/YAM LUS THIB OB

Koj tus me nyuam tau xub kawm hais yam lus twg? \_\_\_\_\_ As Kiv \_\_\_\_\_ Lwm yam (qhia kom meej)

Feem ntau nej hais yam lus twg tom tsev? \_\_\_\_\_ As Kiv \_\_\_\_\_ Lwm yam (qhia kom meej)

Feem ntau koj tus me nyuam hais yam lus twg? \_\_\_\_\_ As Kiv \_\_\_\_\_ Lwm yam (qhia kom meej)

## TEJ XOY XWM TXOG KEEB KWM MOB NKEES THIAB KEV LOJ HLOB TUAJ

Koj tus me nyuam puas tau mus kuaj tag nrho keeb kwm mob nkees thiab kev loj hlob tuaj thaum nws tseem tsis tau pib mus kawm ntawv (hnub nyoog 3-5 xyoos)?

\_\_\_\_\_ TAU \_\_\_\_\_ TSIS TAU Yog tias tau, tau ua kev kuaj hnub twg: \_\_\_\_\_ Qhov chaw twg: \_\_\_\_\_

Koj tus me nyuam puas tau ua kev ntsuam xyuas seb puas tsim nyog mus kawm ntawv tshwj xeeb los sis tau mus kawm ntawv tshwj xeeb dhau ntawm ib qho Individual Education Program (Tswv Yim Qhia Ntawv Kom Haum Rau Ib Tug Twg, IEP) los sis Individual Family Education Plan (Tswv Yim Qhia Ntawv Kom Haum Rau Ib Tsev Neeg TwgIFSP)?

\_\_\_\_\_ TAU \_\_\_\_\_ TSIS TAU

## LAV LUS TXOG COV XOY XWM TXOG NIAM TXIV/NEEG SAIB XYUAS

Ntawm no kuv lav lus hais tias tam li kuv paub tej xov xwm saum toj no muaj tseeb thiab qhia txog peb tas sim no.

**Niam Txiv/Neeg Saib Xyuas Kos Npe**

**Hnub Tim**

**Tej lus qhia thiab lus txhais kom meej rau Kem Ntawv A thiab Kem Ntawv B cov lus nug txog haiv neeg/hom neeg**

Lo lus nug rau Kem Ntawv A nug txog hom neeg, tsis yog haiv neeg. Txawm hais tias xaiv qhov twg hauv Kem Ntawv A los xij, hais kom niam txiv yuav teb lo lus nug hauv Kem Ntawv B uas qhia txog tus me nyuam haiv neeg thaum khij ib los sis ob peb lub thawv.

**Neeg Qhab Asmeskas los sis Neeg Xeeb Txawm Nyob Teb Chaws Alaska** – Ib tug neeg uas muaj caj ceg ntawm cov neeg uas ib txwm nyob hauv Asmeskas Sab Qaum Teb los sis Sab Qab Teb (nov kuj hais txog Asmeskas Nruab Nrab Teb), thiab ua kab lig kev cai raws li pawg neeg ntawd los sis koom tes nrog koog zej zog.

**Neeg Esxias** – Ib tug neeg uas tuaj ntawm Sab Hnub Tuaj, Sab Qaum Teb Tim Sab Hnub Tuaj Tim Esxias Teb los sis Kheb Teb uas muaj li nram qab no, piv xam hais tias, Khab Mees Teb, Suav, Kheb, Nyij Pooj, Kaub Lim, Malaysia Teb, Pakistan Teb, Koog Pov Txwv Philippine, Thaib Teb thiab Nyab Laj Teb.

**Neeg Dub los sis Neeg Asmeskas Dub** – Ib tug neeg uas tuaj ntawm ib haiv neeg dub twg los ntawm Africa Teb.

**Neeg Mev/Neeg Mev Latino** – Ib tug neeg uas tuaj tim Cuba Teb, Mev Teb, Puerto Rico Teb, Asmekas Sab Qab Teb los sis Nruab Nrab Teb los sis lwm kab lig kev cai Mev, txawm tias nws yog haiv neeg twg.

**Neeg Hawaii los sis Lwm Hom Neeg ntawm Pov Txwv Sab Dej Hiav Txwv Pacific** - Ib tug neeg uas tuaj ntawm cov neeg uas ib txwm nyob tim Hawaii, Guam, Samoa los sis lwm Hom Neeg ntawm Pov Txwv Sab Dej Hiav Txwv Pacific.

**Neeg Dawb** - Ib tug neeg uas tuaj ntawm tej teb chaws hauv Europe, Sab Hnub Tuaj Tim Nruab Nrab Teb los sis Africa Sab Qaum Teb.

**TO BE COMPLETED BY SCHOOL DISTRICT PERSONNEL ONLY**

Screening District Number and Type: \_\_\_\_\_

Screening Date: \_\_\_\_\_ Screening District Name \_\_\_\_\_ Child’s Resident District Name: \_\_\_\_\_

Resident Screening District Number and Type: \_\_\_\_\_

MARSS ID Number: \_\_\_\_\_

**Check type of screening child received – STATE AID CATEGORY (SAC)**

*(To be completed by the Early Childhood Screening Coordinator)*

\_\_\_ 41 - Screening by District

\_\_\_ 44 - Private Provider

\_\_\_ 42 - Child and Teen Checkups/EPSTD

\_\_\_ 43 - Head Start

\_\_\_ 45 - Conscientious Objector, no screening

Check the **Primary** type of referral following the early childhood health and developmental screening using STATUS END CODES (SEC). Only one box may be checked. Must have a valid SEC for – STATE AID CATEGORY (SAC) 41. If unsure of referral status for SAC 42-44, use “no referral” SEC 60. **(To be completed by the Early Childhood Screening Coordinator.)**

**Status End Codes:**

\_\_\_ 60 - No referral

\_\_\_ 64 - Referral to early childhood programs\*

\_\_\_ 61 - Referral to special education

*(\*School Readiness, Head Start, Early Childhood Family Education, family literacy)*

\_\_\_ 62 - Referral to health care provider

\_\_\_ 65 - Referral offered, parent declined

\_\_\_ 63 - Referral to special education AND health care provider

\_\_\_ 66 - Rescreen planned

**SCHOOL DISTRICT VERIFICATION OF INFORMATION**

I hereby verify that the above information is true and current to the best of my knowledge.

\_\_\_\_\_  
School District Early Childhood Screening Coordinator Signature

\_\_\_\_\_  
Date