

**Summary Record Checklist**

	<b>Forms</b>	<b>Submitted Date</b>	<b>Submitted by</b>
<b>Child Referral Forms</b>			
1.	<input type="checkbox"/> CAT – Community Intake Form		
2.	<input type="checkbox"/> CAT – School Intake Form		
<b>Intake Forms</b>			
3.	<input type="checkbox"/> CAT Meeting– Member Invitation Letter		
4.	<input type="checkbox"/> CAT – Parent Invitation Letter		
5.	<input type="checkbox"/> CAT – Determination Form		
6.	<input type="checkbox"/> CAT – Intervention Plan		
7.	<input type="checkbox"/> CAT – Progress Report		
<b>Special Education Referral Forms</b>			
8.	<input type="checkbox"/> Pre-Referral Checklist for Communication Impairments		
9.	<input type="checkbox"/> Pre-Referral Checklist for Emotional Disability		
10.	<input type="checkbox"/> Pre-Referral Checklist for Hearing Impairments		
11.	<input type="checkbox"/> Pre-Referral Checklist for Visual Impairments		
12.	<input type="checkbox"/> Pre-Referral Checklist for Specific Learning Disability		
13.	<input type="checkbox"/> Pre-Referral Checklist for Autism Spectrum Disorder		
14.	<input type="checkbox"/> Pre-Referral Checklist for Mental Retardation		
15.	<input type="checkbox"/> Referral for Initial Evaluation		
16.	<input type="checkbox"/> Termination of Services		