



HAMBLEN COUNTY SCHOOLS
DEPARTMENT OF INSTRUCTION

STUDENT NAME: _____ DOB: _____

SCHOOL: _____ GRADE: _____

SCHOOL YEAR: _____

AREA(S) OF INTERVENTION: _____

UNIVERSAL SCREENING RECORD (attach graphs and/or reports)

FALL:

STAR Early Literacy (K-1) DATE: _____ SCORE/PERCENTILE: ___ / ___

or

DATE: _____ SCORE/PERCENTILE: ___ / ___

STAR Reading

STAR Math DATE: _____ SCORE/PERCENTILE: ___ / ___

WINTER:

STAR Early Literacy (K-1) DATE: _____ SCORE/PERCENTILE: ___ / ___

or

DATE: _____ SCORE/PERCENTILE: ___ / ___

STAR Reading

STAR Math DATE: _____ SCORE/PERCENTILE: ___ / ___

SPRING:

STAR Early Literacy (K-1) DATE: _____ SCORE/PERCENTILE: ___ / ___

or

DATE: _____ SCORE/PERCENTILE: ___ / ___

STAR Reading

STAR Math DATE: _____ SCORE/PERCENTILE: ___ / ___

