2018-19 Full Individual and Initial Evaluation Assessment Log
ARDs completed July 1, 2018-Jan 1, 2019

Verbal/ Written request	Date of consent	Name/ID	LEP (Y/N)	New Referral (Eligible/DNQ)	suspected disability (List all)	should have been referred (Y/N)	Date of FIIE (timeline Y/N)	Initial ARD date (timeline Y/N)	additional services (Y/N)	additional services (list)