

**LISBON SCHOOL DEPARTMENT  
PROGRESS REPORT FORM**

Date: \_\_\_\_\_ High School: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Town Responsible for Student: \_\_\_\_\_

Address: \_\_\_\_\_ Send to Attention of: \_\_\_\_\_  
\_\_\_\_\_

**Fill Out Relevant Portion**

A. January Progress \_\_\_\_\_ June Progress \_\_\_\_\_

- \_\_\_\_\_ No concerns at this point
- \_\_\_\_\_ The following concerns (academic/special) exist:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach a copy of this semester's rank card.

B. Concerns with the student:

- \_\_\_\_\_ Transferred to another high school. Date: \_\_\_\_\_
- \_\_\_\_\_ Moved to another town. Date: \_\_\_\_\_
- \_\_\_\_\_ Has been absent for more than 10 school days. Dates of absence: \_\_\_\_\_
- \_\_\_\_\_ Has been removed for disciplinary reasons. Date: \_\_\_\_\_
- \_\_\_\_\_ Referred to an alternative program.
- \_\_\_\_\_ Referred to Student Assistance Team.
- \_\_\_\_\_ Has been referred by staff or parent/guardian for consideration as a possible special needs student.
- \_\_\_\_\_ Other

Summary of action to be taken in response to concerns:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Adopted: November 23, 2009