



MIAMI-DADE COUNTY PUBLIC SCHOOLS

REVIEW OF PSYCHOLOGICAL REPORTS
ORIGINATING OUTSIDE MIAMI-DADE COUNTY PUBLIC SCHOOLS

I. BACKGROUND INFORMATION

Student's Name: ID#: D.O.B.: CA:

Current School: Current Grade:

School District or Agency Generating Report:

Name of Psychologist who Prepared Report: Date of Prepared:

Professional Background: Licensed School Psychologist, License No.:
Licensed Psychologist, License No.:
School Psychologist Employed by M- DCPS or
Other:

II. SCHOOL PSYCHOLOGIST COMMENTS (Check all that apply.)

- REPORT MEETS RECENCY AND PROFESSIONAL BACKGROUND CRITERIA
REPORT IS UNACCEPTABLE
Recency of evaluation
Professional background of evaluator preparing report does not meet professional guidelines for Miami-Dade County Public Schools
Other Reason(s):

COMMENTS:

III.

Name of Reviewer Signature of Reviewer Date

IV. SCHOOL SUPPORT TEAM (SST) REVIEW

- No further data is needed
Further evaluation/re-evaluation by school psychologist is necessary
additional assessment needed:

V.

Name of School Psychologist Signature of Reviewer Date

ATTACH THIS FORM TO A COPY OF THE REPORT

**Note: This form is required for all psychological evaluations originating outside of M-DCPS.