

Classroom Teacher Checklist for the Diagnostic SLP

Performance Assessment of Contributions and Effectiveness of Speech-Language Pathologists (PACE)

Date: _____

Speech-language pathologist to be reviewed: _____

Teacher completing review: _____

Name of building/school: _____

Please indicate the speech-language pathologist's performance of each activity below by choosing "yes" or "no." Please comment as appropriate.

Activity	Yes	No	Comments
Asks me for information when conducting an evaluation of a student in my classroom			
Provides me with results of assessments and screenings of students in my classroom in a timely fashion			
If student does not qualify for services, suggests strategies for success in my classroom			
Provides a clear explanation of my student's assessment results, including the student's communication strengths and weaknesses			
Responds promptly to my requests for screening of students with potential communication weaknesses			
Conducts observations of students of concern in my classroom upon request			
Participates in the RTI process for students in my classroom			

Please add any additional comments that you feel are helpful.