

SNA 2: ASSESSMENT AND INTERVENTION BY SCHOOL-BASED SUPPORT TEAM (SBST)

- To be completed by the SBST in consultation with the teacher
- To be completed when requesting support from the DBST by the school

1. REVIEW

SBST reviews the information provided by the teacher: Section 1, supporting documents, verbal reporting.

- 1.1 Does the SBST agree with the teacher's **identification** of the learner's barrier(s) to learning, strengths and needs/challenges? If not, provide comments:

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Comments:
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- 1.2 Does the SBST agree with the teacher's **support** to deal with the barrier(s) to learning? If not, provide comments or suggest alternative support:

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Comments:
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FORM DBE 120

REQUEST FOR SUPPORT FROM THE DISTRICT-BASED SUPPORT TEAM (DBST), BY SBST

- *To be completed by the SBST only when requesting support from the DBST*
- *Copies of Learner Profile, SNA1 and 2 and all other relevant supporting documents must be submitted.*

Provide reasons and motivation why support is needed from the DBST:

State what support is needed from the DBST:

Initials and surname of SBST Coordinator (print)	Signature	Date:
		20... / ... / ...

PARENT/LEGAL CAREGIVER SUPPORTS REQUEST FOR DBST ASSISTANCE		Yes	No
Comment:			
Initials and surname of parent/legal caregiver (print)	Signature	Date:	
		20... / ... / ...	

PRINCIPAL'S PROFESSIONAL JUDGEMENT ON REQUEST FOR SUPPORT FROM DBST

Request supported		Yes	No
Reason for decision and recommendation			
Initials and surname of principal (print)	Signature	Date:	
		20... / ... / ...	

*Attach this form in front of the SNA 1 and 2 booklet when submitting to the DBST