

Date Sent \_\_\_\_\_

# Speech & Language Progress Report

Name: \_\_\_\_\_

School Year: \_\_\_\_\_

	Date of Reporting period			
	1	2	3	4
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				
Goal:				

1 = No Progress      2 = Little Progress      3 = Adequate Progress      4 = Goal was met  
 N/A = Goal not targeted

Comments

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Should you have any questions about this progress report, feel free to contact me at any time. I can be reached at the school between 8:00 AM and 3:00 PM. Please sign and return this form as soon as possible. Thank you for all you do to help with your child's speech and language.

Sincerely,

I have reviewed my student's progress report.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date