**South Orangetown Central School District**

**RTI First Look Form**

Teachers complete this form for each student discussed. Complete for each teacher who sees this student and is present at the team meeting.

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| **Team:** | | | | | |  |
| **Date:** | | | | | |  |
| **Student Name:** | | | | | |  |
| **Teacher:** | **Strengths:** | **Targeted Behavior:** | **Specific Strategy to Address Behavior:** | **Dates Implemented:** | **Results:** | **Teacher Next Steps:** |
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| **Team:** | | | | | |  |
| **Date:** | | | | | |  |
| **Student Name:** | | | | | |  |
| **Teacher:** | **Strengths:** | **Targeted Behavior:** | **Specific Strategy to Address Behavior:** | **Dates Implemented:** | **Results:** | **Teacher Next Steps:** |
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