

# Elementary LST Caseload Information Form

School \_\_\_\_\_

Teacher Contact \_\_\_\_\_

Date \_\_\_\_\_

Total FTE working in LST at the school \_\_\_\_\_ **FTE**

1. Total number of SLD and MID students in the school \_\_\_\_\_

2. Total number of ESL students (17 /330 / 450 / 470) \_\_\_\_\_

3. Total number of Students 1-7, plus Aboriginal or ELL in K \_\_\_\_\_

4.	Students with designations other than Q326 or ESL receiving service from LST	Number	Designation
		_____	_____
		_____	_____
		_____	_____
		_____	_____

5. Number of students with no designation receives service from LST \_\_\_\_\_

Designated Students with special needs are identified by Ministry assessment procedures, including categories:

**Low Incidence**

- A 319 Physically Dependent
- B 334 Deaf/Blind
- C 320 Moderate to Profound Intellectual Disability
- D 322 Physical Disability or Chronic Health Impairment
- E 323 Visual Impairment
- F 324 Deaf or Hard of Hearing
- G 325 Autism

**High Incidence**

- H 333 Intensive Behaviour Intervention/  
Serious Mental Illness
- K 327 Mild Intellectual Disability
- P 332 Gifted
- Q 326 Learning Disability
- R 328 Moderate Behaviour Support/Mental Illness

**English as a Second Language**

- 330 ELL Including levels 450, 460, 470