

Secondary School Caseload Information Form - BASES

School _____

Teacher Contact _____

Date _____

BASES Teachers

Total BASES teachers FTE at your school _____

A. Single Designation students

1. Total students K 327 _____

2. Total students C 320 _____

Other single designation students

Designation _____ number of students _____

Designation _____ number of students _____

Designation _____ number of students _____

Designation _____ number of students _____

B. Students with a combination of designations

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Designations _____ number of students _____

Total students enrolled in BASES program at your school _____

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