**Snow Gums Learning Alliance**

 **Learning Support Team**

 **LAST Assessment**

 **Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class:\_\_\_\_\_\_\_\_\_\_\_\_**

 **Teacher:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_**

**Assessments**

* Literacy
* Numeracy
* Receptive and Expressive Language
* Behaviour
* Student Observations

**Assessments Administered and Results**

**Recommendations**