**McGinnis Reading Center**

**4511 Sangren Hall**

**Literacy Summary Report**

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| ***Name:*** | ***D.O.B.*** | ***Age:*** |
| ***School/District:*** | ***Grade Level:*** | ***Day:***  ***Semester:*** |

**Reason(s) for Referral:**

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**Assessment(s):**

-Independent Level:

-Instructional Level:

-Frustration Level:

**Overall Reading Strengths:**

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**Potential Areas of Need in Reading:**

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**Recommendations for Reading Improvement:**

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**Overall Writing Strengths:**

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**Potential Areas of Need in Writing:**

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**Recommendations for Writing Improvement:**

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***Submitted by:***

***Approved by:***