**MISSISSIPPI DYSLEXIA SCREENER**

Dyslexia Screener Data

2022 - 2023

Effective July 1, 2017, Section 37-173-15 of House Bill 1046 mandates that each local school district screen students for dyslexia in the spring of Kindergarten and the fall of Grade 1 using a State Board of Education (SBE) approved screener. Please complete the information below and submit completed forms to the Office of Student Intervention Services at dyslexiadata@mdek12.org by May 5,2023. Contact Laurie Weathersby at Lweathersby@mdek12.org for questions concerning the completion of the form.

|  |
| --- |
| **DISTRICT INFORMATION** |
| School District |       | Date |       |
| Contact Person |       | Contact Position |       |
| Contact E-mail |       | Contact Phone |       |

|  |
| --- |
| Check the SBE approved screener that was used for this assessment: |
| [ ]  Amplify mCLASS with DIBELS 8th Edition | [ ]  MS College Dyslexia Screener |
| [ ]  Curriculum Associates  i-Ready Assessment; i-Ready Erly Reading Tasks | [ ]  MS Dyslexia Therapy Association Dyslexia Screener in Association with William Carey University |
| [ ]  Illuminate Education FastrBridge | [ ]  Pearson aimswebPlub Measures  |
| [ ]  Lexercise MS Dyslexia Screener | [ ]  Voyager Sopris Learning Acadience Reading |

|  |
| --- |
| **FALL OF FIRST GRADE****Deadline for Administration: October 21, 2022** |
| **Date screener was given** |  | **Date parents were notified** |  |
| **District/School Name** | **Number of students who were given the screener** | **Number of students who failed the screener** | **Percentage of students who failed the screener** |
| District Name |       |       |       |
| Enter each school name on a separate row. Add or delete rows as necessary. |       |       |       |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **SPRING OF KINDERGARTEN****Deadline for Administration: April 14, 2023** |
| **Date screener was given** |  | **Date parents were notified** |  |
| **District/School Name** | **Number of students who were given the screener** | **Number of students who failed the screener** | **Percentage of students who failed the screener** |
| District Name |       |       |       |
| Enter each school name on a separate row. Add or delete rows as necessary. |       |       |       |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |