

**Modesto City Schools**  
**Participation in STAR Program**

**This must be attached to either an Amendment or IEP form**

Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_ IEP Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*Indicate previous STAR assessment results:*

Assessment	Subject	Performance Levels
CST	English-Language Arts	
	Mathematics	
	Science	
CAPA	English-Language Arts	
	Mathematics	
	Science	

*Indicate how the student will participate in the STAR program:*

*Check the box for the appropriate assessments.*

CST		CMA	
<input type="checkbox"/>	English-Language Arts	<input type="checkbox"/>	English-Language Arts
<input type="checkbox"/>	Mathematics	<input type="checkbox"/>	Mathematics
<input type="checkbox"/>	Science (grade 5 & 8)	<input type="checkbox"/>	Science (grade 5 & 8)

*Indicate if accommodations and/or modifications are needed on CST.*

*Indicate if accommodations are needed on CMA.*

CST Accommodations and/or Modifications	CMA Accommodations

*Indicate if taking CAPA only:*

CAPA only

*Indicate which CAPA Level:*

	CAPA Level	Grade Range	Subjects
<input type="checkbox"/>	I	2–11	ELA, Math, Science
<input type="checkbox"/>	II	2 & 3	ELA, Math
<input type="checkbox"/>	III	4 & 5	ELA, Math, Science
<input type="checkbox"/>	IV	6–8	ELA, Math, Science