Developmental Assessment and Counseling Center

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SCHOOL QUESTIONNAIRE

Child's Name:		Grade:	Date:
School:		_ School Phone: _	
School Address:			
City:	State:	Zip Code:	
Person Completing this Form (Name & Title):			
Email Address of Person Completing this Form:			
List current concerns for this child (behavioral and/	or academic).		
	//www.		
Describe the techniques used to control or change the helpful they have been.	he above listed pro	blems and indicate	how successful or
Identify any assets or strengths that this child demo	nstrates.		

Current school performance - Please check the appropriate columns.

Academic Subject	Well below grade Level (>1 yr.)		at below rel (1/2 -1 yr.)	At grade lev		newhat above de level	Well above grade level
Reading decoding			very week and the second				
Reading comprehension							
Spelling							
Written composition							
Handwriting							
Mathematics Computation							
Mathematics Reasoning							
Compared to typical students the same age:	of Far less	Somewhat less	Slightly less	Average	Slightly more	Somewhat more	Far more
How hard is he/she working?							
What is the quality of this child communication skills?	's						
How consistent is the quality of this child's work?							
How much does this child requiryour assistance to complete his/lassignments?	re ner						
child is served by specific child has a 504 Planchild receives private Please explain the reason for	tutoring				physical th	erapy	age, occupational or s being considered for
Do you have any other thougaware that this information r	ghts or information	n about this chil n parents.	d's work, beha	avior, potentia	ıl or family tha	at you would lik	e to share? Please be

^{**}Please attach a copy of all group tests or individual tests and reports that have been completed on this child.

Behavioral Characteristics

Please indicate how often the behavior is displayed by this student by circling the number which best describes the frequency of each behavior.

1	2 3	4 5
Never	Once a month Once a week	Several times a week Several times a day
1 2 3 4 5	Seems sleepy at school	1 2 3 4 5 Procrastinates 1 2 3 4 5
1 2 3 4 5	Has poor appetite	1 2 3 4 5 Has trouble shifting thought patterns
1 2 3 4 5	Seems sad or unhappy	1 2 3 4 5 Becomes stuck on topics or behaviors
1 2 3 4 5	Talks about feeling stupid or worthless	1 2 3 4 5 Becomes stack on topics of behaviors 1 2 3 4 5 Anxiety/worrying
1 2 3 4 5	Loses interest in having fun	1 2 3 4 5 Anxiety/wortying 1 2 3 4 5 Perfectionism
1 2 3 4 5	Seems irritable	1 2 3 4 3 Ferrectionism
1 2 3 4 5	Moody	
1 2 3 4 5	Plays alone	1 2 3 4 5 Inconsistent work quality
1 2 3 4 5	Cries Easily	1 2 3 4 5 Inconsistent work quality 1 2 3 4 5 Needs reminders to work
1 2 3 4 5	Seems tired	1 2 3 4 5 Needs reminders to work 1 2 3 4 5 Misunderstands directions
12373	Scenis tired	1 2 3 4 5 Misunderstands directions 1 2 3 4 5 Needs to reread information
1 2 3 4 5	Always on the go	1 2 3 4 5 Needs extra time to complete
1 2 3 4 5	Can't sit still	assignments
1 2 3 4 5	Doesn't seem to listen	1 2 3 4 5 Process information slowly
1 2 3 4 5		1 2 3 4 5 Feels overwhelmed
	Often fails to finish things	1 2 3 4 5 Often interrupts or "butts in" to
1 2 3 4 5	Has poor concentration and attention when it comes to school work	others' games
1 2 2 4 5		1 2 3 4 5 Seems disorganized, loses things
1 2 3 4 5	Often fidgets with hands/feet or	needed for school
1 2 2 4 5	squirms in seat	1 2 3 4 5 Takes risks without considering the
1 2 3 4 5	Easily distracted	danger involved (e.g., running into the
1 2 3 4 5	Has a hard time playing quietly	street without looking)
1 2 3 4 5	Talks excessively	1 2 3 4 5 Blurts out answers to questions before
1 2 3 4 5	Displays a short attention span	they have been completed
1 2 3 4 5	Displays poor motivation	
1 2 3 4 5	Needs reminders to work	

Additional comments related to behaviors rated above:							

^{**}Please mail this completed form to: Andrea Foutz 3812 Concord Place, Suite C Roanoke, VA 24018