

Special Education Student Information Parent Form

Student Name	_ Grade	
Previous School Attended	_	
ISP/IEP? Yes or NO Behavior Plan? Yes or No		
Primary Disability Secondary Disab	oility	
Has your child ever received private therapy for behavior?	Yes	No
Does your child have any mental/emotional issues?	Yes	No
Does your child have a medical diagnosis?	Yes	No
Is your child currently taking any medicine?	Yes	No
Does your child's IEP provide for a full-time assistant?	Yes	No
For each answer "Yes", please explain:		
What are your child's strengths and weaknesses?		
What are your concerns about high school?		

To help determine how to best meet your child's needs, a current teacher report has been developed to get a better understanding of how your child learns. Please have your child's teacher(s) complete the following pages. In addition to the current teacher report, please attach your child's most recent psychological evaluation.



Special Education Current Teacher Report

Name of Student:	
Date:	Current Grade Level:
School:	
Name of Professional Complet	ing Report:
Job Title:	-
What are the student's streng	ths in class?
Weaknesses?	
What motivates the student?	
How does the student cope wi	th frustration?
Additional Comments:	

Difficulty with reading comprehension	Yes	No		
Receives modified literature instruction/assessment	Yes	No		
Current reading level:				
Language Arts ILEARN Testing Scores: Above	At	Approaching	Below	
Most Recent NWEA Test Score:				
Strengths:				
Weaknesses:				
Written Expression: spelling, grammar, Sentence/para	agraph struc	ture, vocabulary u	sage, longer	
writing assignments, ability to respond to a prompt inc	dependently	, homework comp	oletion	
Difficulty with compositional spelling		Yes	No	
Poor sentence structure		Yes	No	
Poor grammar		Yes	No	
_		103	No	
Poor punctuation		Yes	No	
Poor punctuation Poor vocabulary usage				
·		Yes	No	
Poor vocabulary usage		Yes Yes	No No	
Poor vocabulary usage Poor organization		Yes Yes Yes	No No No	
Poor vocabulary usage Poor organization Difficulty sequencing ideas	oression	Yes Yes Yes Yes	No No No	
Poor vocabulary usage Poor organization Difficulty sequencing ideas Poor paragraph construction	oression	Yes Yes Yes Yes Yes	No No No No	
Poor vocabulary usage Poor organization Difficulty sequencing ideas Poor paragraph construction Delayed oral language development impairs written exp		Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No	

<u>Mathematics:</u> computation, ability to grasp n homework completion	ew concepts, pr	oblem solving,	math facts men	norized,
Difficulty with computation		Yes	No	
Difficulty with math concepts/vocabulary		Yes	No	
Difficulty with problem solving/applied math		Yes	No	
Receives modified instruction/assessment		Yes	No	
ILEARN Standardized Testing Scores: Above	At	Appro	oaching	Below
Current math level:				
Most Recent NWEA Score in Math:				
Projected 9 th Grade Class (if applicable):	Basic Algebra	Algebra I	Geometry	
Strengths:				
Weaknesses:				
Additional Academic Concerns/Comments:				

Behavior

Social/Emotional/Behavioral Checklist

1. Not a problem	Not a problem 2. Mild Problem 3. Moderate Problem		Problem	4. Serious Problem		
easily distracted	has difficulty working inde	pendently	Has trouble st	aying on task		
Has incomplete work	Has incorrect work		needs an unusual amount of structure			
fidgets	has trouble keeping hands	to self	abuses own or other's property			
is isolated by classmates	walks around room needle	ssly	leaves room without permission			
teases inappropriately	has difficulty making/keep	ing friends	is frequently "picked on"			
daydreams excessively	blames others for mistakes	;	verbally threatens others			
gives up easily	takes property of others		Gets into fights frequently			
talks out	uses inappropriate languag	ge	has poor personal hygiene			
is bossy	leaves building without pe	rmission	rushes through work			
is defiant	has difficulty taking turns		difficulty expressing ideas fluently			
talks back	is disorganized		Has difficulty following class/school rules			
is withdrawn	has poor listening skills		Has trouble following directions			
over-conforms	has difficulty recalling prev	ious material	frequently seeks attention inappropriately			
lacks self-confidence	has difficulty with sensory	input	uses poor judgment about safety			
appears tense/afraid	expresses anger inappropr	iately	has difficulty comprehending oral instructions			
throws objects	is unable to calm self when	upset	has difficulty interpreting social language cues			
cries easily	whines or complains frequ	ently	frustrates eas	ily		
tires easily	has trouble with transition	S	frequently absent/tardy			
Comments:						
Does the student requi	re an escort through hally	vays?		Yes	No	
Does the student have a behavior plan?			Yes	No		
If you answered yes to	any of the three previous	questions, pl	ease explain:			