

TEACHER INPUT FOR YOUNG CHILDREN

Student: _____

Teacher: _____

1. Do you have concerns regarding this student? ____ Yes ____ No
If yes, what is your primary concern? _____
2. What strengths do you see? _____
3. Does the student complete in-class activities within the regular allotted time period? ____ Yes ____ No
4. Does student participate in class:
– verbally (e.g. volunteers oral responses)? ____ Yes ____ No
– nonverbally (e.g. eye contact, takes notes, appears to listen)? ____ Yes ____ No
5. If this student becomes easily upset, can you tell what types of situations trigger the behavior? _____
6. Are informal adjustments currently provided by the teacher? ____ Yes ____ No
If so, please list specific needs for this student: _____
7. Do you think accommodations would benefit this student? ____ Yes ____ No
8. What types of intervention have been provided (e.g. tutoring, special programs) and how often? _____
9. Please add any comments about this student's work, behavior, motivation, etc.:
how specific behaviors interfere with academics:
- general attitude toward school:
- overall mood/affect:
- other _____

10. Please rate the student in the following areas:

	Above Average	Average	Below Average	Don't Know
Basic Reading				
Math				
Handwriting				
Language				
Fine Motor				
Attention				
Listening				
Organization				
Following directions				
Self Regulation				
Activity Level				
Attitude/Work ethic				
Social/ Peer Interactions				
Behavior				
Other: _____				

Thank you for your valuable input regarding this student! Please contact my office, if you have any questions regarding this form. I am not permitted to discuss specific information about a student without parental written consent.

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TEACHER SYMPTOM CHECKLIST

Student: _____

Teacher/Subject: _____

Describe how the statement fits the student most of the time compared to classmates:

N S O A

Never Sometimes Often Almost Always

- _____ a. Difficulty paying attention to details; for example, often makes careless mistakes
- _____ b. Difficulty paying attention for a long time, such as doing schoolwork or listening to instruction
- _____ c. Listening appears to be hard
- _____ d. Finishing schoolwork seems to be challenging due to distraction
- _____ e. Organization of assignments/materials seems challenging
- _____ f. Loses items (e.g. pencils, books, homework)
- _____ g. Avoid tasks that require a lot of effort
- _____ h. Appears easily distracted by outside noises or other things in the room
- _____ i. Seems to forget things (e.g. homework, workout clothes)

- _____ a. Often moves around in chair or fiddle with objects
- _____ b. Difficulty staying seated in a chair
- _____ c. Overly active in movements
- _____ d. Has a hard time engaging quietly
- _____ e. Often “on the go” or seems “driven by a motor”
- _____ f. Often talks too much
- _____ g. Blurts out answers before questions have been completed
- _____ h. Has difficulty awaiting turn
- _____ i. Interrupts others