

Teacher Input Form

Student's Name: _____ Date: _____

Grade: _____ Subject: _____ School: _____

Teacher Completing: _____

Please express your impressions of this student in one or two sentences.

Please describe this student's academic strengths and weaknesses.

Please describe this student's work habits.

Please describe any speech or language concerns you may have regarding this student.

Please describe his/her interpersonal functioning with both peers and adults.

Please describe this student's overall behavior functioning and any concerns you may have.

What strategies have you found to be effective in helping this student with his/her difficulties.

Please list any strategies that have not worked.

Additional comments: