

Student's Name: _____ Grade: _____

Teacher's Name: _____ Title: _____

School Name: _____

Address: _____

Street

City

State

Zip Code

Please completely fill out this form (including the back).

Please rate the student according to the following categories:

1	2	3	4	5
below average		average		above average

WRITING AND READING

Student's overall writing skills:

1	2	3	4	5
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Spelling:

1	2	3	4	5
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Organization of ideas:

1	2	3	4	5
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Vocabulary:

1	2	3	4	5
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Student's overall reading skills:

1	2	3	4	5
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Reading comprehension:

1	2	3	4	5
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Word attack/decoding:

1	2	3	4	5
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MATH

Student's overall math skills:

1	2	3	4	5
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Computational skills:

1	2	3	4	5
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Understanding of new concepts:

1	2	3	4	5
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Problem-solving skills:

1	2	3	4	5
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(more on reverse/next page)

Detach here, if needed ✂

Please rate the student according to the following categories:

1	2	3	4	5
below average		average		above average

PERSONAL QUALITIES

Enthusiasm:	1	2	3	4	5
Leadership:	1	2	3	4	5
Sense of humor:	1	2	3	4	5
Emotional stability:	1	2	3	4	5
Concern for others:	1	2	3	4	5
Student's overall class performance:	1	2	3	4	5

- | | | |
|---|------------------------------|-----------------------------|
| Does the student have any attentional difficulties? | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Does the student seem anxious? | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Is the student often absent? | <input type="checkbox"/> yes | <input type="checkbox"/> no |

Student's Current Reading Level:	Grade Level Equivalent:
Assessment Used:	Date Assessed:

What are this student's strengths?

What are this student's weaknesses?

Does the student receive any support services?

What adjectives or phrases would you use to describe the student?

Please attach a separate piece of paper with any comments that may be helpful to us in understanding this student's needs.

Thank you for your time in completing this form. Please mail to:

RI Tutorial & Educational Services, Inc.
334 East Avenue, Pawtucket, RI 02860 or fax: (401) 728-6509

REQUIRED INFORMATION PLEASE COMPLETE