Appendix 4

Parent Interview

DATE: __________ PARENT: _______________ STUDENT: _______________

CHILD HISTORY
WHEN WAS THE LAST TIME YOUR CHILD DID WELL IN SCHOOL? _______________

WHEN DID HE/SHE START HAVING DIFFICULTIES? _____________________________

WEAKNESS/STRENGTHS AS A STUDENT? ___________________________________

DO YOU KNOW GOOD WAYS TO HELP WITH SCHOOL WORK? __________________

HOMEWORK ROUTINE? _________________________________________________

PATTERNS OF BEHAVIOR/HOW DOES CHILD RESPOND TO STRESS? ____________

__________________________

DO ANY APPLY?

☐ SPED ED/LD ☐ EXPULSION ☐ TRUANCY DISTRICT ☐

☐ GIFTED/TALENTED

FEEDBACK
YOUR RELATIONSHIP WITH SCHOOL/IS THAT IMPORTANT TO YOU? _____________

NEEDS TO BE SUCCESSFUL IN SCHOOL? _____________________________________

WHAT SOCIAL SKILLS DOES HE/SHE NEED TO DEVELOP? ______________________

WHAT DOES CHILD NEED FROM AGENCIES: __________________________________

WHERE WOULD YOU LIKE YOUR CHILD TO ATTEND SCHOOL: ________________

____________________________

NOTES: ___________________________________________________________________

Parent Contacts: ______________

________________________________________________________________________

________________________________________________________________________