

Manlius Pebble Hill Summer Programs

Dear parents/guardians:

Please provide us with a copy of any developmental, psycho educational or psychological evaluations you have on your child. If your child has an IEP and/or a behavior plan, please provide us with a copy.

Child's Full Name:
Date of Birth:
Diagnosis:
School and entering grade:

1. When something is difficult for your child, does he/she demonstrate frustration in any way? If so, how?

2. What things are difficult/frustrating for your child?

3. What helps your child when something is difficult or frustrating?

4. Does your child need help following directions? If so, what kind of help and how much?

5. Does your child need help with reading? YES NO writing? YES NO

How much? _____

6. Is there a difference in the way your child behaves in different settings (home vs. school, with peers vs. with adults, small group vs. larger group)?

7. What are the top three social areas you would like your child to improve in?

8. How does your child do with organized sports or groups?

9. What does your child like to do for leisure activities or hobbies?

10. Does your child have a history of unsafe or inappropriate behavior that we should know about in order to provide adequate supervision? Please explain.

11. Does your child have a history of counseling/mental health services? If so where?

Please describe.

12. Is there any other information that might help us in getting to know your child?

13. Does your child have a behavior plan in school? If so, please provide us with a copy.

-END-

Thank you for your cooperation. Your answers will be kept confidential and only shared with the counselors working directly with your child.