## ELEMENTARY STUDENT ASSISTANCE PROGRAM PARENT INFORMATION SHEET

Student:	Date:	Parent/Guardian's Name:	Grade:		
All question	OTE: This parent information sheet is provided to ans and responses will only be shared with the Studen will may be having in school. Please explain any iter	t Assistance Team. The purpose of this form is to			
YES NO	1. Have you observed any behaviors that concern you regarding your child? Briefly explain:				
	2. Does your child have academic difficulty? Briefly explain:				
	3. Are there any family/life stressors that may	be affecting your child's school performance? B	riefly explain:		
	4. Does your child:				
	Exhibit health problems?				
	Relate well with others?				
	Express intent to harm self or others?				
	Appear fascinated with themes around deat	h?			
	Show undue interest in violent acts?				
	Discuss drug/alcohol freely?				
	_ 5. Have you previously contacted school perso	nnel about concerns? Briefly explain:			
	6. Has someone from Reynolds Elementary So	chool contacted you? Explain:			

Please continue to complete the back of this form.

STUDY AND WORK HABITS	HEALTH	BEHAVIOR	PERSONALITY
Does not complete chores	Frequent illnesses	Disobeys house rules	Defiant
Short attention span	Sleep problems	Constantly moving/hyperactivity	Argumentative
Difficulty following directions	Weight loss	Fights	Depressed or generally sad
Fights about completing homework	Weight gain	Physically aggressive	Defensive
Disorganized	Frequent physical complaints	Disturbs others (i.e. teasing)	Mood swings / emotional (Circle which)
Forgetfulness	Poor hygiene	Easily distracted	Unconcerned/Apathetic
Lack of interest in school work	Frequent complaints of nausea	Daydreams	Dramatic/attention seeking
Lack of motivation	Headaches	Dishonest	Picked on by students
Difficulty concentrating	Frequent physical injuries	Throws things in anger	Withdrawn/loner/socially isolated
Irresponsible	Frequent urination	Uses obscene language/gestures	Passive
Refuses to go to school	Disoriented	Cries easily	Very flat affect/difficult to see any
Truancy/attendance problems	Food issues	Easily frustrated	reaction
Extreme perfectionism	Hearing problems	Engages in risk-taking behavior	Exaggerates facts and details
Poor attitude	Flushed complexion	Self-destructive (Ex. nail biter, cuts, picks)	Poor peer interactions/no friends
Seems to be behind in	Frequently fatigued/tired	Impulsive	Extremely negative
Strengths & Resiliency:	Poor coordination	Easily led by others	Strengths & Resiliency:
Organized	Speech or language issues	Blames others	Makes friends easily
Self-Motivated	Strengths & Resiliency:	Steals	Has play dates
Makes good use of time	Has no ongoing health problems	Cheats	Interacts well with peers
Does chores without being asked	Does not get sick often	Secretive behavior	Good communication skills
Does chores when reminded	Athletic List Sports:	Lack of social skills/manners	Engaged in family activities
Likes school		Easily agitated/angered	Has a good sense of humor
Engaged in school/class		Strengths & Resiliency:	Cooperative
Completes homework		Has good social manners	Creative
Goes to afterschool tutoring		Is respectful to adults	Honest
Works well in a group		Optimistic	Empathetic or sensitive to others
Exhibits responsibility		Exhibits leadership skills	Tolerates change well
Sound decision making skills		Participates in	High self-esteem
Asks for assistance		Respects personal space	Has a best friend or several of them
		Resolves conflict peacefully	