



INTAKE SCREENING FORM

Name: _____ Student ID#: 900-_____

Date: _____ Phone #: _____

What is, or do you think is, your disability? _____

Students check each item(s) that describes you. Complete both pages.

I have no previous diagnosis but would like to be considered for services

I have previously received services for: _____

Medical

Medical Condition/s: _____

Current Medications: _____

Mental Health (Diagnosis): _____

Special Education

Prior History of Special Education

Reason: _____

504 Plan

IEP Special Day Classes

IEP Resource Classes

IEP _____

Reading

It takes me a long time to read

It is hard to understand what I read

I have to re-read often

I lose concentration while I am reading

I often forget what I read

I skip lines when I read

I confuse words that look alike

I see the letters move on the page

I see letters backwards or upside down

like b & d, g & q, or q & d

Sounding out new words is hard for me

Reading to myself helps me understand what I
am reading

I understand a story better if someone
reads it to me

I dislike reading aloud

Math

Math has always been very hard for me

I write numbers in the wrong order (e.g., phone
numbers, addresses)

I mix up math signs such as "x" and "+",
or "÷" and "-"

Math word problems are hard for me

I forget the facts for solving math
problems, such as formulas, rules, time
tables, etc.

When I copy problems from one line to
another, I make mistakes

I have trouble keeping my columns
straight

Written Language

I make frequent spelling errors
I write letters or numbers in the wrong order
I leave out words in sentences
It is hard for me to copy material from the board or a book
I write slowly
I have trouble remembering grammar and/or capitalization rules
It is hard to write down my thoughts
I can write my ideas better than I can say them aloud
People have trouble following the ideas in my written work

Organizational/Study Skills

It is hard to follow directions
It is hard for me to manage my time
I have trouble breaking down large assignments into manageable tasks
It takes me a long time to finish tasks
I often put off my work until the last minute
I have trouble knowing what to study
The notes I take in class are disorganized
I think I could do much better on tests if I had more time
Taking tests makes me very anxious

Social

I can't tell if someone is joking with me or is serious
It is hard for me to have confidence in myself
I have trouble reading body language
I am uncomfortable working in groups
I have trouble making friends
I have trouble asking for help
I don't have any support system

Oral Language

It is hard for me to find the right words to say what I mean
It is hard for other people to understand what I am trying to say
I mix up the order of events in a story
I have trouble understanding lectures
I have trouble following oral directions
I misunderstand what people are telling me
I learn better when someone shows me what to do

Memory/Attention

I forget to do things I said I would do
It is hard for me to remember many instructions at once
I get distracted during lectures
I often find myself daydreaming or staring out the window
I remember information better when I can write it down or see it
It is hard for me to concentrate on reading while I hear noises or people talking
I often make careless mistakes

Additional Concerns

Additional comments and/or parents input: