Student Name \_\_\_\_\_

Sound Learning continually looks for ways to best meet the needs of students. There are many factors that affect student success in weekly group learning situations. So that we may better serve your student, please complete this survey. Your answers are **confidential** and will be shared **only** with your student's teachers.

Your student:	Always	Usually	Sometimes	Never/not attempted
Rushes through work just to get it done.				attempted
Can easily follow written instructions.				
Can easily follow oral instructions.				
Can easily complete multiple-step assignments.				
Procrastinates or avoids doing school because they don't				
know how to get started.				
Procrastinates or avoids doing school because it seems				
tedious, boring, or unimportant.				
Procrastinates or avoids doing school because they busy				
with extracurricular activities or volunteer/job				
responsibilities.				
Has difficulty sustaining attention on school work due to				
internal distractions such as thinking about unrelated ideas				
or activities.				
Has difficulty sustaining attention on school work due to				
external distractions such as sights, sounds, technology				
(phone, computer, TV video games).				
Has difficulty sustaining attention on school work because				
of poor quality sleep.				
Has difficulty realistically planning how long it will take to				
complete an assignment.				
Has difficulty with assignments that require open-ended				
thinking or creativity.				
Double checks their work or proofread their papers.				
Easily loses track of assignments or important papers,				
either in digital or printed form.				
Uses an organized, designated study area and has				
consistent access to a computer.				
Respects authority in the home.				
Respects authority outside of the home.				
Is comfortable participating in groups.				

List outside activities that your student regularly participates in such as debate, music, sports, Awana, and/or other activities.

Is this the first academic classroom experience for your student? If not what other classroom experience have they had?

What are your student's academic and/or personal strengths?

Does your student struggle in any academic and/or social areas?

Are there physical or mental health concerns that your student struggles with? Please explain (i.e. indicate if your student is in counseling):

Please let us know if there are any special family circumstances or distractions. Indicate if your student is adopted or in foster care. Also, include family illnesses, separations, new family members, moves, etc.:

Please tell us how you heard about our program.