Chancy and Bruce Educational Resources, Inc. (To be used with children entering 2nd thru 7th grade)

Date of Screening: March 21, 2020 (appt needed)	Place: HFCS	Cost \$65 payable to HFCS
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Chancy and Bruce Educational Resources, Inc. has my	permission to admi	nister a developmental p	rofile with my child.	
Student's Name		Birthdate:	Birthdate:	
Address	City		Zip	
Primary Phone:	Work:			
Signature of Parent/Guardian:				
Please provide the following information: (if yes, plea Were there pregnancy or birth complications? Was this student premature or post term?	• ·			
Has this student had a history of chronic illnesses?				
Does this student experience allergies?				
Has this student had any unsettling experiences?				

What is the primary language spoken in this student's home

To aid us in determining your student's social-emotional level, please mark in the parent column the behaviors listed below that you have observed your student performing. Your child's teacher will also be marking the behaviors she has observed your child performing in the classroom.

Directions for parents and teachers: Write U for Usually, S for Sometimes, R for Rarely on the line next to each behavior.

	Parent	Teacher
Puts forth reasonable effort in the classroom		
Is respectful of peers and authority		
Gets along well with others		
Takes part in group activities		
Approaches situations with confidence		
Participates with others in large groups		
Behaves positively with peers/classmates		
Works well independently		
Completes assigned tasks on time		
Pays attention		
Follows a sequence of directions		
Functions well in the classroom		
Is eager to learn new tasks		
Verbal communication is clear		
Feels good about self		
Overreacts to situations		
Accepts responsibility		
Impulsive (acts or talks without thinking)		
Extremely overactive		
Oppositional in behavior with peers/authority figure		
Additional Comments: (Use Back if Needed)		
Parents:		
Teacher:		