

Dyslexia

Diagnostic Assessments, Advice and Tutoring

Assessment Background Information

Please print out this form and provide as much detail as possible and return to me along with a £50 deposit made payable to Mrs T.Davies. The balance will be due on the morning of the assessment. Thank you for your time.

Name of pupil:

Date of Birth:

Your name:

Address:

Chronological age:

Tel no:

Brothers and sisters with ages:

Email address:

Father's occupation:

Mother's occupation:

What is the exact nature of your concern?

Details of particular strengths:

Give details of any assessments carried out and their outcome:

What support has been provided (i.e. small group, 1:1)

What support is currently being given (if any)?

History of literacy difficulties/dyslexia in the family?

Is school supportive?

Is pupil on SEN Register?

Does he/she have an I.E.P (individual education plan)? Please attach copy if so.

Outside school – does your child attend any clubs/activities?

Early development

Was the birth long or difficult?

Did your child meet developmental milestones i.e. walking, talking, etc?

Please list any recurrent illnesses resulting in absence from school:

Is there a history of ear infections?

Grommets?

Glue ear?

Date of last hearing test:

Does he/she wear glasses?

All the time?

For reading?

Reason i.e. short-sight/squint

Date of last eye test:

Any allergies?

Asthma?

Hay fever?

Eczema?

Any other comments on health that may be relevant?

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Are there difficulties with any of the following? (please tick/comment):

- | | |
|---|-----------------------------|
| Spelling skills | Retained spellings |
| Reading skills | Reluctance to read |
| Sight vocabulary | Sound-symbol correspondence |
| Handwriting | Copying from the board |
| Using punctuation accurately | Left/right confusion |
| Letter/number reversals | |
| Is cursive script used consistently? | |
| Comprehension tasks | Numeracy difficulties |
| Homework tasks (needs assistance) | |
| Gross motor skills (swimming/riding bike) | |
| Fine motor skills (knife/fork, writing/colouring) | |
| Personal organisation | |
| Self-confidence | Self-esteem |
| Short-term memory | Tiredness |
| Remembering instructions | |
| Expressive language (i.e. word finding difficulties) | |
| Receptive language (not understanding what is said) | |
| Speech production (unclear speech) | |
| Getting ideas down on paper | |
| Discrepancy between oral and written ability | |
| Following instructions | |
| Sequencing skills (months of year, tables, etc) | |
| Attention and concentration skills | |
| Behavioural difficulties arising from low self-esteem/frustration | |
| Any speech or language intervention? | |
| Inappropriate behaviour? | |
| Disruptive? | |
| Impulsive? | |
| Obsessive/repetitive? | |
| Hyperactive? | |
| Very strong self-will? | |
| Social difficulties? | |
| Low general attainment over time in comparison to peers? | |
| What is the computer at home used for (homework/games/research)? | |
| Keyboard skills: Good? Poor? Developing? | |
| Attitude towards school: | |
| Any school refusal? | |
| Attendance: | |
| Motivation: | |
| Imagination: | |

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Schools attended with dates:

Have any of his/her teachers expressed concern? Please give details:

Is he/she good at art?
Model making/lego, etc?

Music?
Sport

Other activities?

Have there been any problems with:

Tying shoelaces?
Fastening buttons?
Knowing how many?
Sense of time?

Learning to dress?
Learning to count?
Telling the time?
Learning nursery rhymes?

Please state any other details causing concern to you or your child:

Please enclose a copy of a recent school report or any other report/assessment.

Further comments: