



**Dan Kehoe, C.Psych.**  
Psychologist

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### TEACHER INFORMATION SURVEY

Student's Name:

Today's Date:

School:

Birthdate:

Age:

Your name:

How long have you known this student?

I am completing a comprehensive psychological assessment with your student. Kindly take a moment from your busy schedule to fill out this survey about your student's progress in your class.

### SCHOOL INFORMATION

- Reading
- Writing
- Mathematics
- Understanding concepts\_\_
- Verbal expression\_\_
- Response to authority
- Concentration\_\_
- Attention to task
- Effort and persistence
- Organizational/Planning

- Being careful and checking work
- Controlling impulses
- Controlling emotions
- Behaving Appropriately
- Getting Along with Peers

Briefly describe what you are most concerned about this student:

Please describe the best things about this student

Is there any other information that may be important to know about your student (**use extra sheets if needed**)?



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**Authorized in:** School, Counselling and Clinical Psychology