

**COUGAR LITERACY CLINIC**  
Southern Illinois University Edwardsville  
Founders Hall Room 1317, Campus Box 1122  
Edwardsville, Illinois 62026-1122  
(618) 650-3082, FAX 618 650-3485, or smcandr@siue.edu

For Office Use Only

Date Received:

**TEACHER FORM**

This student's family has applied for assessment and/or tutoring at the Cougar Literacy Clinic. This form is intended to provide information to the Cougar Literacy Clinic, which will be helpful to us in understanding this student. Please answer as fully as possible and return to the above address. Thank you!

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

School and District: \_\_\_\_\_ School Year 20 \_\_\_\_ to 20 \_\_\_\_

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**ACADEMIC PROGRESS**

1. Summary of academic record (*please attach record or report card and note if any grades were repeated*):
  
2. Participation and duration in special programs (*i.e. tutoring, remedial reading, Title I, Speech, Language, English Language Learning, Special Education- L.D., B.D., P.T., or O.T.; please attach IEP or other documentation if applicable*):
  
3. Attendance record (*include this year and previous years if known*):
  
4. Health records that would affect learning to read or write (*including vision, hearing, or other health records*):

**STANDARDIZED TESTS** (Please include all test results available, i.e. intelligence, achievement, diagnostic, etc.)

<u>Date Given</u>	<u>Grade in School</u>	<u>Name of Test</u>	<u>Results</u> ( <i>including grade equivalents</i> )
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**READING ASSESSMENTS** (*include assessment and observational data*)

What is the student's present reading grade level and based on what assessments? \_\_\_\_\_

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What do you think are the student's strengths in reading (problem solving, word identification and comprehension)?

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What do you think are the student's needs in reading (problem solving, word identification and comprehension)?

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What reading textbooks, basal, or trade books is the student now reading?

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How often and how well does the student read self-selected materials?

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**WRITING ASSESSMENTS** (include assessment and observational data)

What is the student's present writing grade level, based on what assessments and what genres?

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What do you think are the student's strengths in writing (problem solving, content, and mechanics)?

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What do you think are the student's needs in writing (problem solving, content, and mechanics)?

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What genres and forms of writing is the student doing in all content area classes (narrative, descriptive, expository, and persuasive, journals, essays, reports, stories, poetry, letters etc.)?

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How often and how well does the student write self-selected compositions?

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**LANGUAGE DEVELOPMENT**

Describe areas of strength or need in the following areas: Articulation, pronunciation, fluency, syntax, grammar, word choice, communication of ideas, asking and responding to questions or statements

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**GENERAL INFORMATION**

In what areas have you observed this student to show the most ability? Please give specific examples, if possible. Academic \_\_\_\_\_

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Other \_\_\_\_\_

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In what areas have you observed this student to show the least ability? Please give specific examples, if possible. Academic \_\_\_\_\_

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Other \_\_\_\_\_

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In what areas has this student shown interest? (*school subjects, hobbies, etc.*) \_\_\_\_\_

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How would you describe this student's academic motivation? \_\_\_\_\_

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When faced with a difficult task, this student usually \_\_\_\_\_

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In this student's relations with other students I find that \_\_\_\_\_

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In this student's relations with adults I find that \_\_\_\_\_

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The student's emotional state while completing tasks independently is \_\_\_\_\_

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The student's emotional state while completing tasks with peers is \_\_\_\_\_

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As to classroom behavior I find him/her to be \_\_\_\_\_

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Additional comments \_\_\_\_\_

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Printed name: \_\_\_\_\_

Position \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_