



ADHD/ADD New Evaluation – TEACHER INTAKE

Student's name _____

School _____

Teacher's Name _____

Contact number _____

THANK YOU FOR TAKING TIME TO ANSWER THESE QUESTIONS AND COMPLETE THE VANDERBILT RATING SCALE. WE APPRECIATE YOUR TIME AND INPUT. PLEASE TELL US A BIT ABOUT THIS STUDENT.

What concerns you most about this student?

Please describe this student's strengths and best qualities.

Please describe this student's current academic performance.

Is this student receiving extra help in school? Tutoring, special education classes, extra time for tests?

Has this student been evaluated for problems such as learning disability?

Is there anything else you would like us to know about this student?

