

Social History – Intellectual

Student's name:	Date of Birth:
Person interviewed:	Relationship:
School:	Age/Grade:

Birth History

1. Child's birth was full term [] Premature [] How many weeks? _____
2. Complications at birth (list):
3. Birth weight was average (6-9 lbs)[] Low (3 – 5 lbs)[] Very low (<3 lbs.)[]
4. Indications of birth injury? (Explain)
5. Other health concerns in infancy? (Explain)
6. Early exposure to toxins such as lead or pesticides?

Developmental History

1. Age when developmental milestones for talking occurred?
First words:
Combined words into short sentences:
Regression? Yes / No – if so, when?
2. Ages when developmental milestones for walking occurred?
Sitting:
Crawling:
Walking independently:

3. Age when your child could independently...

Feed himself or herself

Toilet trained for wetting

Toilet trained for soiling

Dress himself or herself

4. Has your child experienced any serious injuries since infancy, such as falls, head injuries, burns or broken bones?

5. Does your child have a current medical condition or diagnosis? (e.g. asthma, diabetes, epilepsy, sickle cell anemia, rheumatic fever?)

6. Is he or she receiving treatment such as medication or therapies?

7. Did your child attend preschool? If so, were concerns evident in preschool? (Explain)

Current Concerns

Communication

Does your child demonstrate delays or differences in the way he or she communicates with you?

With brothers and/or sisters?

With other children or adults?

Can your child follow instructions that contain more than one step? (For example, if you ask your child to pick out a pair of socks from the drawer and bring their shoes into the kitchen, can they consistently do both parts of the directions?)

How long will your child listen to people when they talk?

Does your child take turns during conversations with people he or she knows?

Can your child tell you *in detail* about what they did at school or when they're with other family members?

Does your child understand more than what he or she can express in words? (Explain)

Learning

Does your child learn a new skill but have trouble using it in other situations? (For example, if your child learns to write their name on a paper at school, can he or she then write it on a birthday card at home?)

Can your child communicate what he or she needs or wants? If he doesn't get what he wants or needs, what does he do?

Does your child have a favorite interest or topic, like sports or music? Are they the kinds of interests common for your child's age?

Does he or she show difficulty learning skills at home, like caring for pets or helping set the table?

Does your child learn new words or new skills and then forget them?

How does your child compare to his or her siblings when it comes to learning new things?

Did your child learn any unusual skills at an early age? (Explain)

Approximately, how long will your child sustain attention to activities (not watching TV or playing video games)?

Home and Community

Is your child aware of dangers such as fire and busy streets?

Can your child go to birthday parties or play dates without close supervision?

Does your child show caution around a hot stove and around sharp items like knives or razors?

Does your child know the value of coins and bills? Would he or she know whether or not they received correct change for a purchase?

Does your child communicate with others in the community in a way that's typical for other children his or her age?

Does your child's behavior in the community concern you? (Explain)

Self-care

Does your child need your help with any of the following?

Toileting

Bathing

Grooming (hair and teeth)

Dressing and fasteners

Feeding (including using utensils properly)

Using a public restroom

Going to bed at night

Getting up in the morning

Does your child know to wear appropriate clothing for the weather conditions?

Social Skills

Does your child show interest in social interactions? (Explain)

Who are your child's friends?

What does he or she do with friends?

How would you describe your relationship with your child? Mostly positive, challenging, or very challenging?

How would you describe his or her relationships with adults other than you?

Does your child recognize emotions in others? (For example, can he or she identify feelings like angry or scared in someone else?)

Does your child try to please others? (For example, does he or she make an effort to receive recognition from his or her teacher?)

Does your child follow rules in games? (For example, does he or she adhere to the rules about point value or penalties without undue distress?)

Can your child reasonably control his or her angry or hurt feelings when unexpected changes occur?

Your Perspective

What are your major concerns about your child's growth and development?

At what age did you first begin to have concerns?

Are these the same (or similar) concerns that his or her teacher has?

Has your child experienced frequent changes in residence? In schools attended? (List)

What has been done so far at school and at home to address your concerns?

What, specifically, has been the most effective approach with your child?

Are there any medical, psychological or learning problems in your extended family that are similar to your child's difficulties?

What else would you like to tell me about your child or your family that might be important for me to consider during this evaluation?