

INFORMATION GATHERING – KINDLY REQUESTED OF SUBJECT TEACHERS

PUPIL NAME:			DATE: SUBJECT:	
Please mark in the relevant boxes below to indicate whether the areas listed are a cause for concern in relation to the lesson that you teach with this student (referencing up to the last 6 months). There is then a space for you to add in any further comments / ideas / reflections / questions. Thank you for your time.				
Within the last 6 months, have you noticed	No not really	To some extent / a bit	Yes a lot	Other comments or details
Lateness to your class				
Absence from your class				
Exiting from your class during the lesson				
Difficulty focusing during teacher delivery				
Difficulty contributing to class discussion				
Difficulty getting started on work tasks set				
Difficulty engaging in paired or small group work with peers				
Difficulty finishing tasks set in class				
Reluctance to share work completed				
Difficulty completing and returning homework				
Appearance of negative mood in class (lack of eye contact, agitation, dysregulation, no smile)				
Tiredness in class				
That there are certain activities the pupil really struggles with Greater anxiety than is normal around assessments / tests				
Anything else of note?				

Thank you. Please return this to: