



Educational Assessment (Initial Identification)

Student		OEN
Date of Birth	Parent / Guardian Name	
Address		
Telephone Number	School	
Grade	Date	

DEVELOPMENTAL HISTORY (SIGNIFICANT PHYSICAL & SOCIAL-EMOTIONAL MILESTONES)

SCHOOL HISTORY (E.G.: PERFORMANCE IN PRIOR GRADES; SCHOOL CHANGES; SUSPENSIONS; SOCIAL ADJUSTMENT)

STATEMENT OF CURRENT PERFORMANCE AND CONCERNS

GRADES REPEATED:

ASSESSMENT RESULTS (STANDARDIZED / FORMAL / INFORMAL TESTS)

ANALYSIS OF RESULTS

Strengths

Needs

CONDITIONS UNDER WHICH STUDENT FUNCTIONS BEST

Submitted by:

FREEDOM OF INFORMATION ACT

Personal information on this form is collected under the Education Act and will be transferred to the student record folder (OSR).
Questions about this collection should be directed to the school principal or Superintendent of Education