



OXFORD AREA SCHOOL
Special Needs - Parent Nomination Form

Child's name: _____ D.O.B.: _____

Nomination Details:

Please circle the number for each item which best describes your child.

4 = always 3 = usually 2 = sometimes 1 = never

- | | | | | |
|---|---|---|---|---|
| Struggles to read new or unfamiliar material | 4 | 3 | 2 | 1 |
| Finds learning new things difficult | 4 | 3 | 2 | 1 |
| Hard to retain new facts and information..... | 4 | 3 | 2 | 1 |
| Processes things slowly | 4 | 3 | 2 | 1 |
| Has a limited vocabulary, repeats familiar words often..... | 4 | 3 | 2 | 1 |
| Does not ask many questions | 4 | 3 | 2 | 1 |
| Struggles with any 'homework'. Needs support | 4 | 3 | 2 | 1 |
| Has a short concentration span | 4 | 3 | 2 | 1 |
| Is very compliant | 4 | 3 | 2 | 1 |
| Struggles to set personal goals | 4 | 3 | 2 | 1 |
| Has a poor memory | 4 | 3 | 2 | 1 |
| Is not overly curious | 4 | 3 | 2 | 1 |
| Interested in things intended for younger people | 4 | 3 | 2 | 1 |
| Struggles with the arts (in any of the arts) | 4 | 3 | 2 | 1 |
| Finds it difficult to follow instructions | 4 | 3 | 2 | 1 |
| Not interested in games or puzzles | 4 | 3 | 2 | 1 |
| Is generally dependent on others | 4 | 3 | 2 | 1 |
| Has a simple sense of humour | 4 | 3 | 2 | 1 |
| Has a limited range of interests | 4 | 3 | 2 | 1 |
| Gets frustrated when trying new things | 4 | 3 | 2 | 1 |
| Tends to dominate others if given the chance | 4 | 3 | 2 | 1 |
| Not overly interested in the world around them | 4 | 3 | 2 | 1 |
| Very sensitive | 4 | 3 | 2 | 1 |
| Poor physical co-ordination and body control | 4 | 3 | 2 | 1 |
| Needs lots of sleep | 4 | 3 | 2 | 1 |
| Happy to keep doing routine things for long periods | 4 | 3 | 2 | 1 |
| Untidy - struggles to tidy things themselves | 4 | 3 | 2 | 1 |
| Often does not complete tasks set for them | 4 | 3 | 2 | 1 |
| Prefers to play with younger peers | 4 | 3 | 2 | 1 |
| Daydreams | 4 | 3 | 2 | 1 |
| Sometimes hurts others when unable to keep up | 4 | 3 | 2 | 1 |
| Does not enjoy school - complains work is too hard | 4 | 3 | 2 | 1 |
| Struggles to see logical conclusions | 4 | 3 | 2 | 1 |

What books has your child enjoyed recently? _____

What are your child's major interests and hobbies? _____

What extra activities is your child involved in? _____

What is your child's favourite subject at school? _____

What does your child like to do in their free time? _____

What problems (if any) is your child experiencing at school through their special needs? _____

What other information do we need about your child? _____

(Please feel free to add additional pages to this form)

Name: _____ Date: _____

Relationship: _____ Phone: _____

Return this form to Oxford Area School, marked "attention SENCO"