

Family/Student Interview for WCPSS Alternative School

(Referring School: Please interview student and family)

Student's Name

Date

Parent Interview

With whom does student reside? _____

Please indicate current address and phone. _____

Please indicate name(s) and age(s) of adults, siblings and other household members and their relationship to student.

Person	Relationship to Student	Person's Age

If student is not living with both birth parents, where does non-custodial parent live and describe visitation and/or relationship, if any.

What do parents see as the child's difficulties at school?

Are there any agencies involved with this child, please check all that apply. If other, please list.

☐ Mental Health ☐ Juvenile Court ☐ DSS ☐ Other

Agency and contact:

Does anyone in the family have a history of substance abuse, mental illness or a physical illness?

☐ Yes ☐ No If yes, please explain.

Does anyone in the family have a court history? ☐ Yes ☐ No If yes, please explain.

Has student ever been on medication or is he/she presently taking medication?

☐ Yes ☐ No If yes, name of medication. _____ Is this medication current? _____

Please indicate if child has any medical problems (ie allergies, seizures, meningitis, asthma, diabetes, etc.)

Are there others significantly involved with the child? (Adults, peers, other family members, etc.)

Student Interview

What are student's perceptions of his/her reading skills and strengths?

What activities does the student enjoy?

What are the student's perceived competencies? (What do they think they do well?)

What are the student's goals for the future?
