

3. Please describe any special abilities, strengths or interests the student has:

4. How do you feel the student's personal, social and emotional development is being affected by his/her experience of learning difficulties?

5. What special help, support and provision have you made available, or do you recommend, to help with this student's development?

6. Any other information of relevance:

Name of Person completing Questionnaire:

Position:

Telephone Number:

Date:

Thank you very much for taking the time to complete this questionnaire.