

## Caretaker Observations/Information

Child Name: \_\_\_\_\_

Date: \_\_\_\_\_

Caretaker: \_\_\_\_\_

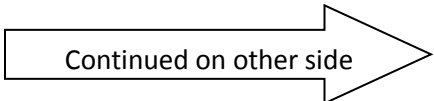
Relationship: \_\_\_\_\_

Does this child receive any special services at school? (IEP\_\_\_\_, 504 plan\_\_\_\_) Do not know \_\_\_\_  
If yes, how long has this been in place and for what problem?

Comments/concerns about this child's **behavior** in the home/school/ community setting (compared to other children of the same age). If concerns exist, please describe how this problem affects the child or others.

Comments/concerns about this child's **learning /school work/homework** (compared to other children of the same age). If concerns exist, please describe how this problem affects the child or others.

Comments/concerns about this child's **mood or emotional state** in the home/school/community setting (compared to other children of the same age). If concerns exist, please describe how this problem affects the child or others.

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Describe **how long** each problem has been happening and any **patterns** that you observe.

Describe any life/home/school **changes or stressful events** that have taken place in this child's life (even if they seem small).

Describe the **strengths and good qualities** that you observe in this child?

Describe any **strategies** that have been used to address concerning behaviors.

Describe any **other resources/support people/strategies** that you think could be helpful to this child?

Other comments:

***Thank you very much for your time and input.***