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## Educational Assessment: Part B

603 CMR 28.04(2)(a)(2)

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Student Name: DOB:                      Grade:                      Date:

School Personnel & Role:

### CURRENT TEACHER ASSESSMENT:

1. Describe the student's specific abilities in relation to the learning standards of the Massachusetts Curriculum Frameworks and the district curriculum. Attach additional information (e.g. work samples and/or observational data) to support your response.
  
2. Does the student appear to have attention difficulties?  NO     YES    If **YES**, please explain  
  
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3. Does the student seem to participate appropriately in classroom activities?  YES     NO    If **NO**, please explain.
  
  
4. Do the student's communication skills seem age-appropriate?  YES     NO    If **NO**, please explain.
  
  
5. Does the student's memory appear to adversely affect learning?  NO     YES    If **YES**, please explain.
  
  
6. Are the student's interpersonal skills with groups, peers and adults age-appropriate?  YES     NO    If **NO**, please explain.
  
  
7. Comment on any additional factors that influence the student's performance.