

New Mexico
Baptist Children's Home
Drawer 629
Portales, New Mexico 88130

PARENT: Please send or take this form to your child's school.

SCHOOL PERSONNEL: This child's family is seeking placement at the New Mexico Baptist Children's Home. Please help us in our evaluation of this child by completing the following form to the best of your ability and return it to the parents.

Please send a copy of the child's transcript to the address listed above.

DATE _____ NAME OF CHILD _____

LENGTH OF ENROLLMENT _____

NAME & ADDRESS OF SCHOOL _____

PRINCIPAL'S NAME _____

COUNSELOR'S NAME _____

Is Child Absent Often? If Yes, Why. _____

Grades Repeated _____ Grades Skipped _____

Do you have any major concerns about this child? If yes, please explain.

Has there been a significant change in grades? _____ yes _____ no

Is the child capable of better work? _____ yes _____ no

**Is this child in any special classes or programs?
If yes, explain and send a copy of IEP.**

If any achievement or intelligence testing has been done with the child, please include the names of the tests and the scores.

How has this child adjusted to school, teachers, and classmates?

How does this child respond to discipline?

How does this child respond to praise?

Describe the child's personality.

List special abilities and/or attributes of this child.

Please give us any information about this child or his family that you think might help us to understand them better.

SIGNED _____

POSITION _____