

ACCESS ARRANGEMENTS: PARENT QUESTIONNAIRE

Student's Name: _<insert name here>_ **Year Group:**<insert year group here>

Date of Birth ____ <insert here> **Tutor Group:** _____ <insert here>__

The information below is required in order to make an application for exam access arrangements in your child's upcoming exams. Please complete as accurately as possible.

Background information	
Please give details of any professionals who have been involved with your child at any time:	
Were there any concerns regarding your child's early development or pre-school years?	
Yes/No	
If yes, please explain:	
Did your child receive additional support at Primary School?	
Yes/no	
If yes, please give details in as much detail as possible (What support was given, what were the difficulties, did the support help?)	

Language and communication:			
Did your child experience any early speech and/or language delays, which involved a speech and language therapist?	Yes/No		
If yes, please explain			
Does your child:	No Concern	Some Concern	Great Concern
Take a long time to respond to instructions/questions?			
Appear forgetful?			
Need instructions explained in simple language?			
Appear not to understand what you are asking or saying?			
Talk very little?			
Need instructions repeated?			
Struggle to find the right words to say?			
Struggle to articulate or pronounce speech correctly?			
Forget what they were about to say?			
Get lost in the middle of a sentence?			
Interrupt conversations?			
Cognition and Learning:			
Did your child experience any early reading, spelling, writing or other difficulties with learning, which required a high level of additional help and support?	Yes/No		
If yes, please explain:			

Does your child:	No Concern	Some Concern	Great Concern
Take a long time to complete their homework?			
Have problems reading and following written instructions?			
Take a long time to read or process information?			
Struggle to take in and remember what s/he has read?			
Struggle to understand what to do or what they have read, needing explanation?			
Appear forgetful or distant?			
Have handwriting which is very difficult to read?			
Prefer to use a laptop/computer/ipad?			
Struggle to get started when writing?			
Appear to struggle to get to the point and answer the question?			
Able to explain their ideas verbally, but struggle to put them into writing?			
Have very poor spelling rendering work incomprehensible?			
Have poor punctuation and/or grammar in writing?			

Behaviour, concentration and organisation	No Concern	Some Concern	Great Concern
Does your child:			
Have difficulty following verbal instructions?			
Have difficulty concentrating for long periods without a break?			
Have difficulty remembering messages, appointments?			
Need to have instructions repeated or shortened?			
Need regular prompts to stay on task or to slow down?			
Slow to respond to verbal questions?			
Have difficulty meeting deadlines and time concepts?			
Understands, but forgets what to do?			
Become extremely anxious about exams?			
Become easily distracted?			
Need time or prompting to get started on a task or activity?			
Other			
Do you have any other concerns, which are not outlined above, regarding your child's development, learning, behaviour or performance?			

Signed _____ Dated _____

Thank you for taking the time to complete this questionnaire. If you have any questions, please contact <insert name here>

Please return to: <insert name here >

By <insert date here>