

**SCHOOL REPORT TO SUPERIOR
COURT/CSSD—FAMILY SERVICES**

JD-FM-8 Rev. 7-16

STATE OF CONNECTICUT
SUPERIOR COURT

www.jud.ct.gov



Instructions:

1. Family Relations Counselor to complete first 3 lines of this form.
2. School to complete remaining information on this form and return to the address below for Family Services office.

Address of Family Services office					Family Relations Counselor name			
Name and address of child					Date of birth			
Name and address of school					Docket number			
Date entered	Present grade	Credits earned	Grades repeated	Number of schools past 3 years	Special Education	504		
					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Education tests and dates:		I.Q. Performance		I.Q. Verbal	I.Q. Final	Grade ability		
Description and date(s): <input type="checkbox"/> ELL <input type="checkbox"/> Learning disability <input type="checkbox"/> ADD/ADHD <input type="checkbox"/> ED <input type="checkbox"/> Intellectual disability <input type="checkbox"/> Autism <input type="checkbox"/> Other disability <input type="checkbox"/> TBI <input type="checkbox"/> SLD/Dyslexia <input type="checkbox"/> Speech/Language impaired								

Psychiatric/Psychological tests and dates		Diagnosis	IEP needs
Medications			
Physical exam date and examiner	Findings		
Attendance record			

School adjustment / behavior / relationships with peers and authority figures		
Child's overall ability to adapt to change		

Parents involvement with school / parent-teacher conferences / PPTs / results		
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Observations of parent-child interactions / parents preparation of care for school day		
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Social Services Agency contacts and results		
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Return completed report to Court by: _____		
Attach copies of current academic records, including grades, evaluations, IEP/504 plan, PPT reports, and student success plan, if applicable.		
<input type="checkbox"/> "X" box and and use reverse/another sheet if you have additional remarks that may help the court in understanding this child.		
Signed (Preparer)	Title	Date signed