



Intermediate Unit 1

Serving Fayette, Greene, and Washington Counties

One Intermediate Unit Drive | Coal Center, PA | 15423

Phone: 724.938.3241 | Fax: 724.938.6665

www.iu1.org

Dr. Donald W. Martin

Executive Director

☐ **FAYETTE SERVICE OFFICE**
11 East Penn Street, Suite 200
Uniontown, PA 15401
(724) 437-3237

☐ **GREENE SERVICE OFFICE**
300 North Street
Waynesburg, PA 15370
(724) 627-8314

☐ **WASHINGTON SERVICE OFFICE**
90 Manse Street
Washington, PA 15301
(724) 222-9400

☐ Initial Date of Report: _____ Social Worker: _____	☐ Addendum Interview Date: _____
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SOCIAL HISTORY ASSESSEMENT

Name: _____ DOB: _____

Parent/Guardian: _____

Address: _____ Phone: (h) _____
_____ (c) _____

District: _____ School: _____

Grade: _____ Placement: _____

Interview Date(s): _____

Informant(s): _____ Relationship to student: _____

REASON FOR REFERRAL: (Included is who is making the referral and why the referral is being made):

EDUCATION: (The following areas will be addressed in this section if they pertain to the educational adjustment of the student.)

- age
- history of early intervention programs
- preschool
- school history
- grade
- retention
- attendance
- suspensions
- specialized services (SAP)
- grades
- special education services
- other related services
- transportation
- teacher/adult/peer relationships
- behavior
- behavior scales
- other information if indicated

FAMILY: (The following areas will be addressed in this section if they are relevant to the educational adjustment of the student.)

- family composition and history
- household members – names, ages
- household members – occupations, relationships
- abuse issues
- neglect issues
- substance abuse
- mental health issues
- sexual abuse
- domestic violence
- animal abuse
- fire setting
- bed wetting/enuresis
- psychosocial stressors
- criminal involvement
- child/parent relationship
- siblings
- extended family
- significant others
- other household members
- traumatic events
- income
- death
- family health history
- other information if indicated

DEVELOPMENT AND PHYSICAL HEALTH: (The following areas will be addressed in this section if they are relevant to the educational adjustment of the student.)

- prenatal history
- developmental milestones
- motor skills
- health history
- eat/sleep
- accidents
- hospitalizations
- corrective lens, hearing aid, etc.
- stressors
- trauma
- substance abuse
- hygiene
- past and current physical health
- immunizations
- other information if indicated

COMMUNITY RESOURCES/ACTIVITIES: (The following areas will be addressed in this section if they are relevant to the educational adjustment of the student.)

- psychiatric hospitalizations
- out patient treatment
- wrap around services
- medications
- Children and Youth services
- Juvenile Probation Office services
- other agency involvement
- clubs and activities
- interests and hobbies
- participation and/or cooperation with agencies
- other information if indicated

SUMMARY: (optional)

Signature / Title