

College Academic Success Services
Program Intake Information Questionnaire

Background Information – General

1. Tell me about yourself and what interested you in this program?
2. Tell me about your disability history and any services you have used in the past, in and out of school?

Background Information – Learning

1. What study techniques do you currently use?

- | | | |
|---|---|---|
| <input type="checkbox"/> Quiet setting | <input type="checkbox"/> Paraphrasing | <input type="checkbox"/> Regular study schedule |
| <input type="checkbox"/> Mnemonics | <input type="checkbox"/> Study
group/partner | <input type="checkbox"/> Long-term planning |
| <input type="checkbox"/> Tutor sessions | <input type="checkbox"/> Outlining text | <input type="checkbox"/> Review of notes |
| <input type="checkbox"/> Daily planner | <input type="checkbox"/> Flashcards | <input type="checkbox"/> Identifying key points |
| <input type="checkbox"/> Highlighting | <input type="checkbox"/> Marginal notes | <input type="checkbox"/> Assignment notebook |
| <input type="checkbox"/> Rewrite class
notes | <input type="checkbox"/> Charts & diagrams | <input type="checkbox"/> Other |

2. How do you feel/act when concentrating during class and/or when studying for or taking a test? (Anxious, fidgety, distractible, difficulty recalling information, etc.)
 3. Have you used any assistive technology for school work? If so, what technologies have you used? (ebooks, screen reader, Dragon, etc.)
 4. Which academic/study habit areas do you have difficulty with?

<input type="checkbox"/> Understanding class lectures	<input type="checkbox"/> Note-taking
<input type="checkbox"/> Paying attention	<input type="checkbox"/> Being prepared for class and/or exams
<input type="checkbox"/> Participating in class	<input type="checkbox"/> Talking to teachers
<input type="checkbox"/> Asking for help	<input type="checkbox"/> Procrastination
<input type="checkbox"/> Meeting new people	<input type="checkbox"/> Reversing letter or numbers
<input type="checkbox"/> Beginning assignments	<input type="checkbox"/> Keeping up with assignments
<input type="checkbox"/> Budgeting time	<input type="checkbox"/> Completing assignments
<input type="checkbox"/> Keeping appointments	<input type="checkbox"/> Family commitments
<input type="checkbox"/> Over-extended with activities	<input type="checkbox"/> Frequent absences
<input type="checkbox"/> Over-extended with work	<input type="checkbox"/> Cramming for tests
<input type="checkbox"/> Not finishing test	<input type="checkbox"/> Reading/following directions or maps
<input type="checkbox"/> Processing information slowly	<input type="checkbox"/> Writing speed
<input type="checkbox"/> Putting steps of a task in order	<input type="checkbox"/> Becoming easily frustrated with school work
<input type="checkbox"/> Verbally expressing thoughts	<input type="checkbox"/> Other (specify) _____
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Background Information – Academic

1. Did you ever repeat a grade? _____ Yes _____ No

*If **yes**, what grade(s) and why?

2. Will you be taking your diploma this year? From what school?

3. Have you ever missed two consecutive weeks or longer?

If YES, what was the most frequent reason for your absences?

_____ Illness

_____ Disciplinary action

_____ Work

_____ Moving

_____ Lack of interest

Other: _____

4. Is this your first time attending college? _____ Yes _____ No

5. Which of the following **campus resources** do you think might be beneficial to you? And which would you feel comfortable seeking assistance from on your own?

_____ Tutoring services

_____ Counseling office

_____ Writing center

_____ Career services

_____ Other (please list) _____

Background Information – Goals

1. What are your educational goals?

2. What would you like to major in?

3. What are your career goals?

4. What would you like to get out of this program?

Background Information - Life

1. Are you currently employed? Where?

2. On the average, how many hours per week do you work?

3. If in college, how many credit hours are you currently enrolled in?

4. Are you receiving any additional outside financial assistance or financial aid?

If **yes**, what kind?

Please provide any other information that you feel is important for me to know.