

TEAM'S PARENT'S GOALS

Parent Signature: _____ Date: _____

Student Name: _____ Entering Grade: _____

CLASSROOM SURVIVAL SKILLS

- _____ Functioning within classroom limits
- _____ Paying attention in class
- _____ Understanding and following directions
- _____ Organizing, planning, and completing assignments
- _____ Student/Teacher communication skills
- _____ Coping and compensating strategies

STUDY SKILLS

- _____ Listening Skills
- _____ Notetaking
- _____ High-lighting
- _____ Record keeping, organization
- _____ Studying for tests
- _____ Test-taking
- _____ Producing reports and projects
- _____ Critical thinking

READING / LANGUAGE

- _____ Readiness
- _____ Comprehension
- _____ Content area reading skills
- _____ Elements of grammar
- _____ Paragraph and essay writing
- _____ Phonics
- _____ Vocabulary development
- _____ Reading and understanding novels
- _____ Sentence structure and syntax
- _____ Creative writing

MATHEMATICS

- _____ Math readiness
- _____ Word problems
- _____ Basic math operations
- _____ Geometry
- _____ Pre-algebra
- _____ Algebra

OTHER

TEAM LEARNING CENTER

Teaching Excellence, Achievement, Motivation

1031 E. Lincoln Avenue, Orange, CA 92865 ♦ Tel: (714) 998-2208 Fax (714) 998-3909

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