

Please complete and return to Mr. Baker in the Counseling Center



**San Diego High School**  
 School of Business & Leadership ☐  
 School of International Studies ☐  
 School of Science & Technology ☐  
**theschoolcounselor.org**

*Student Support Plan: Parent Report*

Students Name: \_\_\_\_\_

Graduation Year:    2019    2020    2021    2022

Name of person completing this form:

**Does your student work on homework each day?**

Always                      Almost Always                      Sometimes                      Rarely                      Never

**Does your student regularly communicate with his/her teachers?**

Always                      Almost Always                      Sometimes                      Rarely                      Never

**Does your student prioritize his/her time and activities?**

Always                      Almost Always                      Sometimes                      Rarely                      Never

**Does your student regularly use his/her planner or some other type of calendar for staying organized & keeping track of due dates, tasks, & deadlines?**

Always                      Almost Always                      Sometimes                      Rarely                      Never

**Work Habits: Student,**

- \_\_\_\_\_ Works independently and completes work  
 \_\_\_\_\_ Needs a little assistance but completes work  
 \_\_\_\_\_ Needs a lot of assistance and takes time to complete work  
 \_\_\_\_\_ Is easily distracted and does not complete work

**How many hours each day, on average, does your student spend outside of school studying?**

☐ 0-3                      ☐ 3-6                      ☐ 6-10                      ☐ 10-15                      ☐ 15 or more

Does your student exercise regularly?    Yes    No

What does your student do for fun?

What is one accomplishment that your student is proud of?

Is your student a member of a team or involved in an activity either at school or outside of school? If yes, which ones?

List two *STRENGTHS* you see in your student:

- 1.
- 2.

List two areas of concern you have about your student:

- 1.
- 2.

Overall, student takes personal responsibility for their learning:

Yes                      Getting There                      Needs Encouragement                      Not Quite There                      Not At All

I have been in contact with his/her teachers.    ☐ Yes ☐ NoI have been in contact with teachers regarding:    ☐ Grades    ☐ Attendance    ☐ Behavior    ☐ Other

Additional Comments:

