

Psychoeducational Evaluation Template

Name: _____

Date: _____

Contact Information: _____

Reason for Evaluation:

Background Information:

Educational History:

Medical History:

Family History:

Current Medications/Health Conditions:

Assessment Components:

Cognitive Assessment: _____

Results and Interpretation:

Academic Assessment:

Results and Interpretation:

Emotional and Behavioral

Assessment: _____

Results and Interpretation:

Observations and Interviews:

Review of Records:

Summary and Recommendations:

Signature: _____ **Date:** _____