

**OSAGE NATION SOCIAL SERVICES  
CHILD AND FAMILY ASSESSMENT**

**SUPPLEMENTAL QUESTIONNAIRE:  
EDUCATION**

1. Name of Child \_\_\_\_\_ School \_\_\_\_\_ Address \_\_\_\_\_ Grade \_\_\_\_\_

2. If your children are not currently enrolled in school, why?  
Child \_\_\_\_\_  Dropped Out  Expelled  Suspended  Other  
When? \_\_\_\_\_  
What was the last grade completed? \_\_\_\_\_  
Is your child enrolled in a GED program? Yes No  
If yes, where? \_\_\_\_\_  
\_\_\_\_\_

Child \_\_\_\_\_  Dropped Out  Expelled  Suspended  Other  
When? \_\_\_\_\_  
What was the last grade completed? \_\_\_\_\_  
Is your child enrolled in a GED program? Yes No  
If yes, where? \_\_\_\_\_  
\_\_\_\_\_

3. Do your children like school? Yes No  
Why?

4. Is school important to your children? Yes No  
Why?

5. Do your children intend to graduate from high school? Yes No

6. What are your children's plans after finishing high school?

7. Do any of your children have a learning disability? Yes No  
If yes, please explain:





20. How do your children get along with his/her teachers?

21. How do your children get along with other students?

22. Have any of your children ever been in the office for disciplinary reasons?  
If yes, for what? Yes    No

23. Have any of your children ever been suspended from school?  
If yes, for what? Yes    No

24. What school activities or sports are your children involved in?

25. Please write any comments or questions about your children's education and/or information regarding resources/services: