



Psychoeducational Testing Summary

Student Name: _____ School: _____

Date of Birth: _____ Age _____ Grade Level: _____

Is this the initial evaluation? Yes No If no, previous evaluation date: _____

Name of Professional(s) Completing SUMMARY: _____

Date of Summary Completion: _____

Name of Examiner: _____ Date of Examination: _____

Reason for testing:

SCORE SUMMARY

Cognitive Ability

Name of Test: _____

Full Scale IQ (FSIQ): _____

Subtests:

Note: subtests may differ. The test administered may not include all the tests listed below. If so, please skip. If there were additional subtests given, just write the name of the subtest on the line(s) for "Other."

SS = Standard Score % = Percentile

	Current Testing	Previous Testing (if applicable)
Verbal Comprehension: % _____	SS: _____ % _____	SS: _____
Visual/Spatial:	SS: _____ % _____	SS: _____ % _____
Working Memory	SS: _____ % _____	SS: _____ % _____
Processing Speed	SS: _____ % _____	SS: _____ % _____
Fluid Reasoning	SS: _____ % _____	SS: _____ % _____
Other	SS: _____ % _____	SS: _____ % _____

Notes on Results:

Achievement Test

Name of Test: _____

Subtests:

Note: subtests on Achievement Tests may differ. The test administered may not include all the tests listed below. If so, please skip. If there were additional subtests given, just write the name of the subtest on the line(s) for "Other."

Letter/Word Identification: Standard Score: _____ Percentile _____

Word Attack: Standard Score: _____ Percentile _____

Passage Comprehension (Reading Comprehension): Standard Score: _____ Percentile _____

Sentence Reading Fluency: Standard Score: _____ Percentile _____

Applied Problems (Mathematics): Standard Score: _____ Percentile _____

Calculation: Standard Score: _____ Percentile _____

Math Fact Fluency Standard Score: _____ Percentile _____

Spelling Standard Score: _____ Percentile _____

Written Expression (Sentence Composition) Standard Score: _____ Percentile _____

Listening Comprehension Standard Score: _____ Percentile _____

Other: _____ Standard Score: _____ Percentile _____

Other: _____ Standard Score: _____ Percentile _____

Other: _____ Standard Score: _____ Percentile _____

Notes on Previous Achievement Test Results (if applicable) _____

Notes on Current Achievement Test Results: _____

Behavior

Behavior Information Identified in Report: _____

SLP, OT, PT, Counseling, Psychiatrist, Etc. Testing Information and Notes:

General Recommendations from Report:

Official Diagnosis: