



Dr. T. Scott Smith
600 Jefferson Street
Lafayette, LA 70501
(physical address)

Strategy 365 Consulting, LLC
2851 Johnston Street, Suite 527
Lafayette, LA 70513
(mailing address)

Please note that the present report sample is based upon a summary of profiles across several previous referrals. The present sample is not intended to represent an individual person or referral. Any similarities to a specific person or referral is strictly coincidental.

November 21, 2022

Educational Evaluation

Patient's Name:	Roger Thomas
Sex:	Male
Age:	17
Race:	Caucasian
Date of Birth:	March 5, 2006
Years of Education:	11.5, Junior, Presently attends St. Felicity Catholic HS, Bonaparte, LA
Date(s) of Evaluation:	November 5, 2022

Reason for Referral: Roger's parents, Evan and Sandra, made the referral because Roger has generally been performing poorly in school, earning several Ds and Fs in in classes. They wanted to evaluate 1) whether or not he is at grade level for academic skills, 2) obtain a measure of intelligence, 3) determine if he has delayed or slow processing of information, and 4) obtain "initial impressions" and "recommendations" regarding his ongoing academic progression. Information in this evaluation was obtained from an interview with the referral, and educational testing was complete. Two evaluations were completed. For one evaluation, Sandra, Roger's mother was present, and then for the second evaluation, or both sets of parents were present during the evaluation.

Confidentiality Limits: Limits of confidentiality were discussed with the referral. The present report will be provided to the parents. If deemed necessary, the present report will be shared with St. Felicity Catholic High School, Bonaparte, LA, upon

their request. And, the present report may be shared with others that Roger or Roger's parent deem appropriate.

Limits Regarding Diagnoses and Provision of Treatment: I advise the referral and his parents that my background encompasses Educational Psychology and Rehabilitation Counseling. I noted that I have licensure in Rehabilitation Counseling, and then certifications in both Rehabilitation Counseling and Life Care Planning. If treatment is warranted, including counseling or medical management, I will defer these services to a Licensed Psychologist, Licensed Counselor, or Physician, and the same applies to a formal diagnosis. My services will be limited to clinical interview, parent consultation, school consultation, and generation of a report. No follow-up or follow-along services were offered or implied to be provided. However, I do offer an opportunity to meet with school counselor or officials to further discuss the present report, if warranted.

Results of Clinical Interview: A clinical interview was conducted in order to understand Roger's applicable history. During the interview, educational testing was similarly completed, in which the results will be discussed later in the present report.

Roger has struggled for years to maintain his grades, despite a demonstrated ability to learn. His grades were often Ds and Cs. However, during both Freshmen and Sophomore year of high school his parents were notified that he was in jeopardy of failing a course. He is now in his Junior year. He is enrolled in the TOPS degree path at St. Felicity Catholic High School, located in Bonaparte, LA. His current high school GPA is approximately 2.0, and he scored a 19 on the ACT-pretest.

In general, Roger is discouraged regarding his academics and feels he is "not smart." He does reach out to his teachers to request assistance with tutoring or to enhance his understanding of course materials.

Specific subjects or classes, in which he struggles were unable to be pinpointed, suggesting it is a more global difficulty across all of his academic courses. However, he particularly stated that he has difficulty with Mathematical and Science-based courses in high school.

He has struggled since Junior High, or approximately 6th to 7th grade. The struggles were initially attributed to the harder course load typified of middle school, but

then later it was assumed that he was simply not committing his best efforts towards academic tasks, furthermore result in his poor academic performance.

After several years of struggling academically, he was tested for Attention Deficit Hyperactivity Disorder (ADHD) by his treating physician. He was diagnosed with ADHD at the end of his 7th grade year, in 2015, by Dr. Mickey Javert, Pediatrician. His Physician requested Roger's parents and all of his teachers to conduct a screening in order to diagnose. (It is assumed that this was self-report type instrument completed by Roger's parents and teachers.) Following this diagnosis, Roger was scripted medication to alleviate his ADHD. An improvement has been observed when he consistently takes his medication.

He does not take his medicine when he is not in school. Considering the face-to-face evaluations were completed when he was not in school, he was not on his medicine. As such, the present evaluation was completed when he was not on his medication. He self-reported that he does not like how he feels when on the medicine.

Roger's brother and sister have also been diagnosed with ADHD. He also has a cousin that was diagnosed with Dyslexia and working memory issues. It was suggested that there may be concern for Dyslexia, as his parents indicated that he exhibits some of the markers. Roger has no diagnosed psychological disorders, specifically mood or personality disorders.

Considering his age, he shaves, his voice has changed, and he has undergone growth spurts, it is easily assessed that he has begun puberty.

Roger's mother, Sandra Thomas, is the Executive Director for the Elderly of Bonaparte Foundation, responsible for fundraising and managing the assets of the Foundation. She has a Bachelor's Degree in Biology with a minor in Communication. His father, Evan Thomas, is the Director of Market Development for United Way, and is responsible for managing the business development team. He has a Bachelor's Degree in Psychology with a minor in Communication. As such, both parents have college degrees and work in a professional capacity.

His parents feel that potentially he may be a B or C student, as he has demonstrated the ability to discuss something learned effectively, but simply does poorly on

exams. As a result of his poor test performance he consistently earns Cs and Ds, and additionally has been “flirting” with passing or not passing several classes.

He does not have any hearing or vision problems. It is assessed that he does not have sensory deficits that limit his ability to learn. He does wear glasses, but his vision is corrected with glasses. He is able to see traditional 12- and 14-size font. He does not require hearing aids. We were able to communicate without difficulty during the evaluation.

He self-reports that he is not a strong reader and often has to reread passages before he can adequately comprehend written material.

His parents have witnessed him demonstrating an understanding of subject matter, as an example, by completion of pre-tests for various subjects, but Roger consistently obtains poor grades on exams.

Considering he plays basketball, he has shown he is able to understand the sequence of plays or cognitive aspects of basketball. He reports the ability to remember plays and perform sequencing while playing basketball.

Roger does not struggle with socialization, as he often attends social events on weekends, and attains friends easily.

There is no known major life event or tragedy that is current, such as death of a relative, divorce, or other major life-changing event that may affect attention, reasoning, or attention.

Educational and Vocational Goals: Roger stated that he aspires to graduate from St. Felicity Catholic High School and then attend college. He has not pinpointed a major, but indicated that he may be interested in “some type of business” or Marketing degree.

Psychiatric/Psychological History: Roger received a diagnosis of having attention deficits, by Dr. Mickey Javert, a Pediatrician, at the end of his 7th grade year in 2015. He was given a prescription and a small improvement was noticed while taking the prescribed medication. He no longer takes the medication. Both of his siblings have similar diagnoses. He has had no psychiatric hospitalizations.

Social History: Roger was raised in the Bonaparte area with a loving family. He lives with his family at 131 Southern Lane in Bonaparte, LA. He has an older, 18-year-old brother, Tim, and one younger, 14-year-old sister, Gilda. His mother, Sandra, earned a Bachelor's degree in English and his father, Evan, earned a Bachelor's degree in Psychology. His mother works as the Executive Director at the Elderly of Bonaparte Foundation. His father works as the Director of Market Development for the Elderly of Bonaparte Foundation. It was reported that Roger has a healthy social life, participating in social activities on weekends, having lots of friends, and sleeping over at his friends' homes. He easily makes new friends. He is able to drive a vehicle without any accommodations. He is also on the basketball team at school. He was a middle linebacker on the football team in his sophomore year, but quit the team to focus on school more.

Educational History: Roger is currently a Junior at St. Felicity Catholic High School, located in Bonaparte, LA. Previously, he attended St. Anne Elementary School, also located in Bonaparte, LA. Roger's curriculum is within the TOPS University diploma curriculum. He does not currently have any disability accommodations. Last year, his sophomore year, he finished, after struggling throughout the year, earning several Ds and a couple of Cs. He has not yet taken the ACT. However, he scored a 21 on the ACT pre-test. This year, he is taking Chemistry, Algebra II, American History, English III, French, Physical Education, and Religion. Last semester he had a 2.0 GPA. His overall GPA is a 1.8, however.

Regarding present grades, I asked him to justify or state a reason for the attained grades, in which the following responses were obtained:

- Biology: D, did well on the first 2 tests, but fell behind as the quarter continued
- Trigonometry: D, did not turn in homework, resulting in his poor grade performance
- American History: C, enjoyed this class, learned more, obtained a better grade
- English III: C, enjoyed the coach who taught it and papers helped his grade
- Latin: C, enjoyed more
- Religion: B, easier to learn
- Physical Education: A

Medical History: He has no significant medical history.

Behavioral Observations: Roger arrived on time with his mother for his scheduled appointment for the first evaluation. He was dressed appropriately for the weather and occasion. He appeared as his stated age. He presented as alert and fully oriented. He ambulated independently with no noticeable deficiencies. The same observations occurred during the second meeting.

Tests Administered:

Intellectual Functioning, Kaufman Brief Intelligence Test 2 (KBIT-2)
Academic Aptitudes, Wide Range Achievement Test
Academic Aptitudes, Kaufman Test for Educational Achievement

Intellectual Functioning, Kaufman Brief Intelligence Test

It is important to note that intelligence represents a broad-based of cognitive skills. I used the Kaufman Brief Intelligence Test 2 for this intelligence assessment. The KBIT-2 may be used in educational, clinical, and research areas. Considering that the present circumstance is both clinical and educational, it represents an appropriate test. The KBIT-2 has been used since 1990, with the latest edition following in 2004. As such, it represents a modern test to measure intelligence in this circumstance. There are three scores for the KBIT-2: verbal, non-verbal, and overall composite.

From a theoretical standpoint, the KBIT-2 measures crystallized intelligence, or intelligence which is reflective of learned skills, such as verbal reasoning and knowledge. Crystallized intelligence can be learned through schooling, informal teaching and educational experiences, and generalized experiences when a child learns something new. Considering that in the present circumstance an adult was tested, an adult's crystallized intelligence is relatively stable. That is, adults traditionally have completed their high school education and gained exposure to communication from others. Test results are compared against others in their age groups. Fluid intelligence consists of abilities that make a person both flexible in their thinking and gives them the ability to adapt to situations; it further allows one to understand the relationships among concepts.

Raw Score	Standard Score	90% Confidence Interval	Percentile Rank	Descriptive Category
--------------	-------------------	-------------------------------	--------------------	-------------------------

Verbal	85	100	93-107	50%	Average
Non-Verbal	33	91	83-100	27%	Average
IQ	-	95	88-102	37%	Average

Interpretation. He is within the normal range for his chronological age and grade. I would classify him as Average for intelligence. It is noted that his verbal intelligence is greater than non-verbal intelligence; however, this would be considered an average deviation. It is noted that for easier items for the Matrices section he would often miss the correct answer and then correct himself afterwards. Then, he was able to obtain correct answers for more-advanced items, again on the Matrices section. It is most probable that his intelligence score would have still been within the Average range but higher if he had maintained attention and monitored his mistakes.

Academic Aptitudes, Wide Range Achievement Test

The Wide Range Achievement Test (WRAT-4) is made up of four subtests: Word Reading, Sentence Comprehension, Math Computation, and Spelling. The purpose of this test is to measure basic academic skills in order to detect for learning abilities or disabilities.

	Raw Score	Standard Score	90% Confidence Interval	Percentile Rank	Grade Equivalent
Word Reading	56	96	88-104	39%	10.9
Spelling	41	98	91-105	45%	11.0
Math Computation	39	92	84-100	30%	7.2
Sentence Comprehension	33	86	78-94	18%	6.8

Interpretation. He is within the normal range for his chronological age and grade for Word Reading and Spelling. However, he is below grade-level for both Math Computation and Sentence Comprehension. I would classify him as Average for Word Reading and Spelling, but Below Average for both Math Computation and Sentence Comprehension. Interestingly, he performed at grade-level for tasks that require a single-step to complete (i.e., Spelling: spell a single word; Word Reading: read a single word), but he performed poorly for tasks requiring multiple steps.

For Math Computation, it is noted that during testing he made several inane mistakes, in which he quickly corrected himself. Then, after testing I asked him about several problems that he skipped or were incorrect. Quickly, he was able to correct himself or state “we’ve done that...I’ve seen that...I don’t remember how to do that problem.” This is suggestive that he monitors himself while he completes academic tasks, but fails to correct himself, furthermore justifying his poor performance on testing.

For Sentence Comprehension, he requested me to repeat several sentences, which broke away from testing protocol. However, after completion of the test he began to recall and indicate that “I know I messed up a few sentences...I now know the correct answer.” Then, when I repeated the sentence, he would be able to offer the correct answer.

Academic Aptitudes, Kaufman Test for Educational Achievement

Linguistic and Mathematical Fluency. For present purposes, fluency will be defined as the ability to respond readily, obtain command of content, and generate responses quickly. Oftentimes, individuals will not be able to learn or perform poorly academically due to poor fluency. I required Roger to complete a sequence of reading comprehension (linguistic) and mathematical computation (mathematical) tasks at a fast speed, requiring him to complete as many as he could within a three-minute interval. For both of these tasks, he was able to complete at grade level (mathematical) and above grade level (linguistic). It was noted that he does process mathematical information at a slower rate than linguistic material, but this would not be considered an abnormal deviation.

Summary and Conclusions

General Demographics

Roger was referred by his parents for an educational evaluation. Essentially, Roger is a well-mannered, Caucasian male, with supportive parents. Roger is currently academically struggling in school. However, he is well-adjusted regarding social life and social interactions. He does not have any neurological or sensory deficits, and there are no current life-changing events (i.e., divorce or deaths) that may interplay with his ability to learn.

Results of Educational Testing

He has a difference in academic aptitudes between linguistic-based materials (i.e., courses in English, History, Religion), and numerically-based materials (i.e., course in Chemistry, Physics, Geometry, or Algebra). Similarly, this could account for his poorer performance in numerically-based courses at present. However, I do not assess that a statement that “he is four grades behind for numerically-based skills” is correct. Rather, a statement “he makes careless errors and his errors deflate his true numerically-based testing scores to be more correct.

Examination of Why Roger Struggles Academically

While the above information has outlined various parameters of Roger’s intelligence, academic skills, and cognitive abilities, an important question remains: **Why does Roger continue to academically struggle?** From my perspective, the following reasons justify why someone or anyone fails to perform well academically. I have also outlined my perspective for his current academic challenges.

1. Cognitive Deficits, Intellectual Capacity.
2. Learning Disability
3. Social-Emotional Difficulties
4. Attention-Deficit Hyperactivity Disorder
5. Stressors
6. Poor Academic Foundations
7. Poor Test Taking Skills

There are no concerns with intellectual abilities, which are all within the average range and commensurate with his educational attainment.

I do not foresee that he has a Learning Disability. Oftentimes, during the evaluation his parents would indicate their belief that he has Dyslexia. The following offers my general feedback regarding a diagnosis of Dyslexia:

- He does have difficulty in learning to write, spell, and do arithmetic. However, there is a difference in his tested abilities (i.e., comparatively good ACT score, 21), and then his traditional performance in the academic classroom. I believe his difficulty in learning is due to attention, as opposed to cognitive inability to process information, particularly considering he is able to perform well in classes that he enjoys.

- During the evaluation he did not have problems following directions. Individuals with Dyslexia typically have problems following simple directions; he did not have problems doing this.
- He has excellent penmanship. His writing was not cramped or illegible.
- He is able to stay on tasks, albeit he does have deficits in this area. We met for about 1 ½ hours on two occasions. He would occasionally become bored, but he stayed on task consistently.
- He did not have problems with confusion in sequence, such as mixing up positioning for Bs and Ds.
- He does not appear to have delays in spoken language. He is able to converse without difficulty and he maintains friendships.
- He does not have difficulty with directions, such as up and down, left and right.
- He does have frustration with learning. And, I do associate his frustration due to both continuous poor academic performance and lack of reinforcement for completed studying activities.
- He states that he had difficulty retaining information, but his self-report is inconsistent. As an example, he equates his present academic performance not to inability to learn the information, but rather due to loss of homework points and whether or not he enjoys the topic at hand.

He does not appear to have any social-emotional difficulties. He has friends, participates in social events, and is not a recluse or isolated.

He likely still struggles with symptoms of ADHD. He would likely benefit from accommodations for this disability while in school. This may help to improve his grades. I assess that the ADHD most probably affects him more than expected and concurrently inconsistent medication protocols affect him in the classroom. More specifically, his ADHD affects his ability to stay on task during classroom instruction, preventing him from recording needed assignments to be completed, and obtaining quality notes; it limits his ability to study, furthermore, limiting his ability to intake information for later testing.

I do assess that stressors, specifically his fear of failure, does affect his academic performance. Prior to a test he traditionally does know the material, he becomes nervous about failing a test, he loses concentration due to this fear of failure, and then he does perform poorly on a test. As such, there is cycle of academic failure based not on poor academic knowledge, but poor performance based on true stressors prompting poor academic performance.

I do assess that he has poor test-taking skills. Prior to taking tests he self-reported that he “knows the answer” but “gets it wrong on the test.” His self-reports and my direct observations concur—he generally knows the applicable material but does poor with daily testing. He reports that he takes pre-tests for many of his subjects and “does well at home” but “bombs the test” when he actually takes the tests. This variation in performance at home and during tests may be due to high anxiety, problems with attention, or both. It is my assessment that test anxiety is the main culprit for poor academic performance, as opposed to strictly intelligence or academic aptitude.

Additional Observations

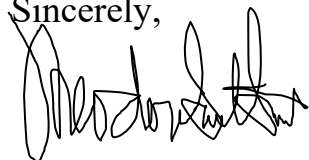
His attained pre-ACT score indicates that he has a foundation of academic skills to both succeed in high school and then perhaps do well in college. If he had scored, 16-18, then I would assess that he has a poor foundation to proceed forward academically.

An “expectancy effect” is happening regarding his present academic performance. That is, he is generally expecting to perform poorly, he performs poorly, then he meets the general expectation that he will perform poorly. Unfortunately, he is within a cycle of poor performance and present living up to this expectation.

However, I do assess that supportive parents, self-monitoring regarding his continued academic performance, and awareness of both strengths and weaknesses will enable him to perhaps maintain a 2.0 to a 2.4 GPA. While he intends to attend a 4-year college, I would encourage him to concurrently consider vocational-technical opportunities, such as Drafting, Culinary Arts, or similar occupations. I am concerned that his transition to college will be difficult, particularly considering his difficulties in high school.

I reserve the opportunity to modify the present report based on receipt of additional information. Also, please find the present invoice for services rendered accompanying the present report.

Sincerely,

A handwritten signature in black ink, appearing to read 'T. Scott Smith', with a stylized, cursive script.

T. Scott Smith, PhD