



Student Name: _____

Date: _____

Student ID#: _____

Academic Skills Self-Assessment

Instructions: For each of the skills/activities listed, place an (x) in the number box that best represents the level of impact your disability has on the skill or activity.

Classroom Skills	Easy 1	2	3	4	Difficult 5
Avoiding Distractions					
Focusing on lectures/activities					
Comprehending lectures/activities					
Taking notes					
Following the instructor's visuals					
Keeping up with the instructor					
Following verbal directions					
Participating in discussions					
Working in a group					
Retaining Information					

Test Taking Skills	Easy 1	2	3	4	Difficult 5
Taking timed tests					
Taking multiple-choice tests					
Writing test essays/short answer responses					
Remembering the test material					
Processing speed					
Coping with test anxiety					
Finishing exams on time					



Homework Skills	Easy 1	2	3	4	Difficult 5
Organizing your study time					
Planning tasks for large assignments					
Completing writing assignments					
Sustained Reading					
Sustained Writing					
Time Management					
Managing disruptions					
Taking/Reviewing Notes					
Recalling Information					
Doing research					
Memorization					
Following Written Directions					
Studying for tests					
Organizing written work					
Putting thoughts into words					
Starting a paper					
Organizing assignments					
Completing homework on time					
Motivation					

Instructions: Place an (x) in all the boxes that apply.

BIGGEST CONCERNS:

- Technology / CANVAS
- Interacting with Others
- Amount of Homework / Completing Homework
- Studying for and Taking Exams
- Organization Skills / Time Management
- Motivation / Persistence
- Advocating for Yourself
- Navigating Campus