

NEZ PERCE VOCATIONAL REHABILITATION SERVICES
Psycho-Social Assessment Tool
116 Veterans Dr. POB 365, Lapwai, ID. 83540
Phone: 208-843-9395 1-866-440-1109
Fax: 208-843-9396

1. How many siblings in immediate family _____

 2. Whom were you raised by _____

 3. Were you or any siblings adopted out of family Yes No
If yes, who _____

 4. Did you attend Boarding School Yes No
 5. Did either parent attend any Boarding School Yes No

 6. Did any grandparent have Alcohol/Drug problem Yes No
 7. Did either parent have Alcohol/Drug problem Yes No

 8. Do you practice any religion or have a higher power Yes No
If yes, what type _____
 9. Do you recognize Spirituality Yes No

 10. Do you know your family tree Yes No

 11. Do you have any mental illness Yes No
Explain _____

 12. Does any family member have any mental illness Yes No
- #TVR _____