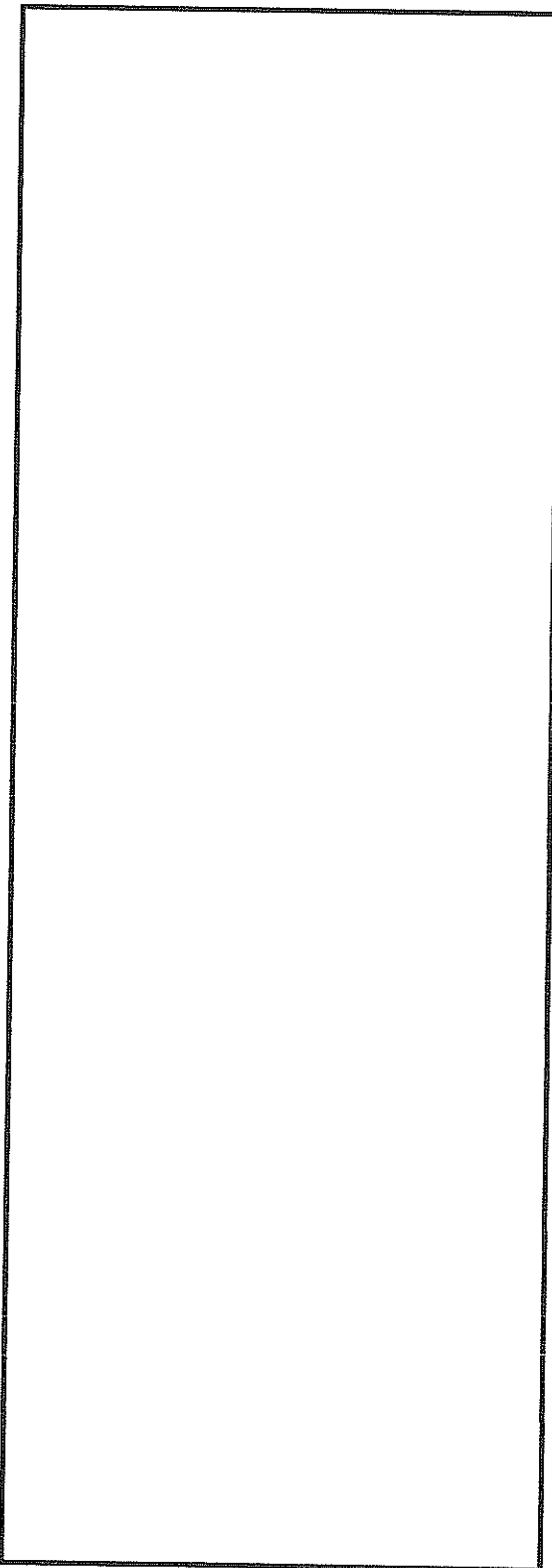




**B. Expressive Language Skills.**

1. General information:

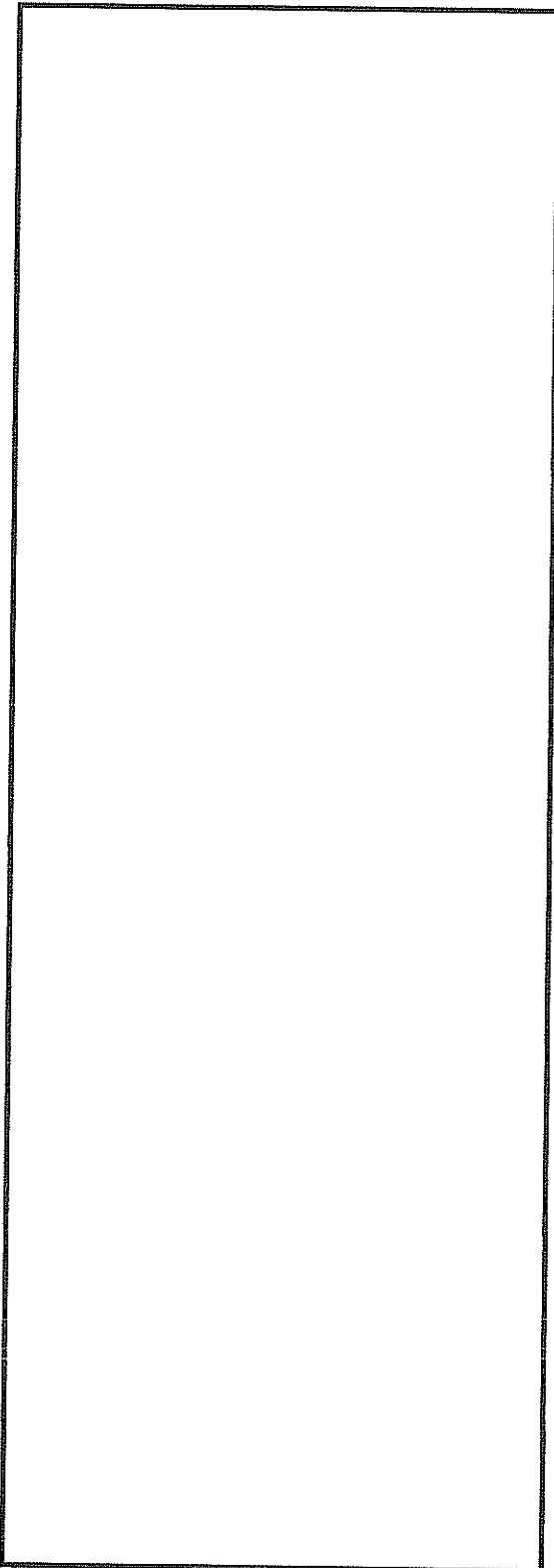
- a. Does the person use VERBAL LANGUAGE to express needs?
- b. If "YES," what language does the person generally use?
- c. Approximately how many words can the person use?
  - i. Of these, how (or percentage) many are used to interact in a meaningful way with others?
- d. Does the person use speech spontaneously, or must prompts be used?
- e. Does the person ask meaningful questions to obtain information or to get needs fulfilled?
- f. Does the person greet others by name?
- g. Does the person initiate or hold conversations with others? If so, how complex are these conversations?
- h. Does the person relate personal experiences in a factual manner?
- i. How understandable is the person's language? Are there any difficulties with understandability? Are there any articulation problems?
- j. Does the person have problems such as stuttering, echolalia (immediate or delayed), of perseveration.



General Information

2. People communicate in many different ways. In addition to the above means of communicating, does the person use the following methods to communicate needs? If "YES," describe briefly.

- a. Aggression (e.g., hit, kick, slap, push).
- b. Tantrums (e.g., scream, cry, throw).
- c. Verbal or physical threats (e.g., raised fist, "I'll hit you." "I'll get you." "If you don't do \_\_\_\_\_, I will \_\_\_\_\_").
- d. Ritualistic behavior. (e.g., checking, retracing, opening, and closing, muscular tics).
- e. Self-Stimulatory Behavior (e.g., flapping hands, twirling, jumping, staring at lights).
- f. Self-Injurious Behavior (e.g., slaps, hits, bites, scratches, bangs self).
- g. Grabbing, pulling, touching others.
- h. Reaching.
- i. Change in intonation and/or volume.
- j. Proximity to others (e.g., gets closer)
- k. Running.
- l. Hyperactivity or motor agitation.
- m. Withdrawal.
- n. Crying, whimpering.
- o. Gaze shift (e.g., looking away).
- p. Other.



General Information

3. Describe how the person usually indicates that he / she wants things such as the following:

- a. An object.
- b. Something to eat or drink.
- c. Someone to come or be near.
- d. To have attention.
- e. To play.
- f. To be tickled or wrestled with.
- g. To be with peers and others.
- h. Time alone.
- i. More space (go away).
- j. A certain activity.
- k. To be touched.
- l. Needs to use the toilet.
- m. Wants to go to bed.

4. Describe how the person indicates he / she wants SOMEONE to do the following:

- a. Give something.
- b. Perform some action.
- c. Give assistance.
- d. Come closer.
- e. Give praise and affection.
- f. Give information or to clarify something.

A large, empty rectangular box with a black border, intended for recording the responses to the questions above. It occupies the right half of the page.

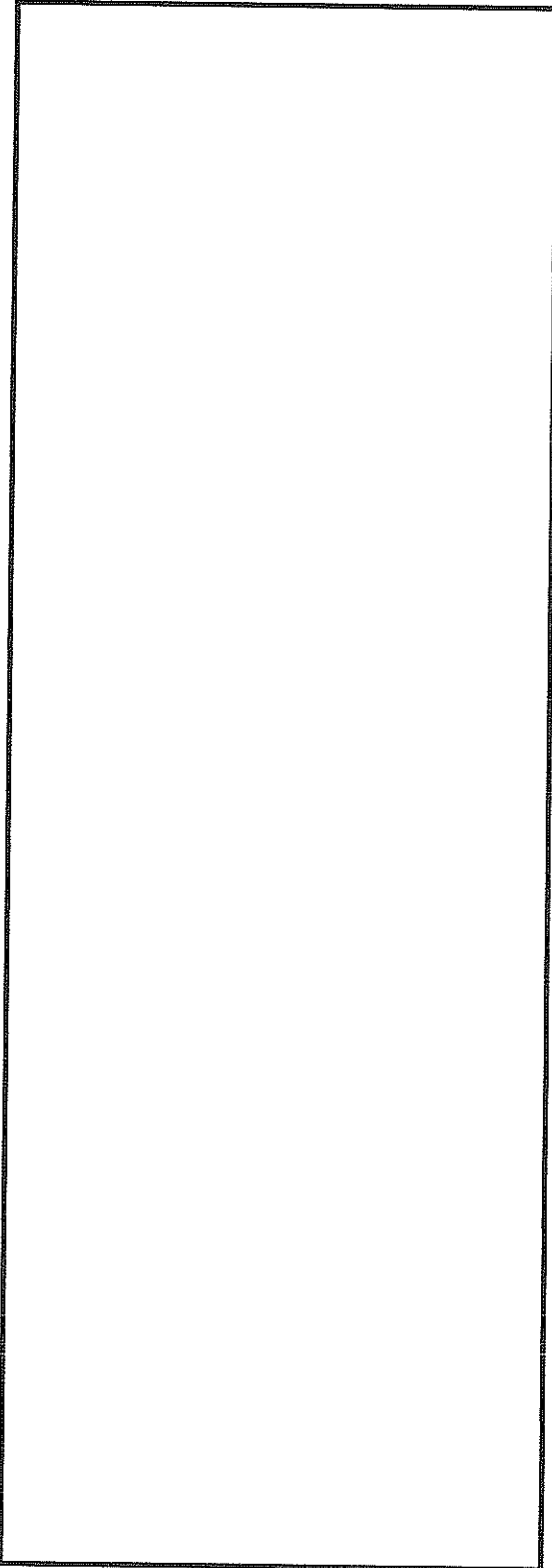
General Information

5. Describe how the person communicates to SOMEONE the following:

- a. To "stop" some action or activity.
- b. Refusal of an activity (e.g., "No, I don't want to.")
- c. Wants to take a break.
- d. A change of mind, position, task.
- e. Wants to continue beyond allotted time.
- f. Wants to leave the situation.
- g. Wants to be left alone.

6. How does the person express the following:

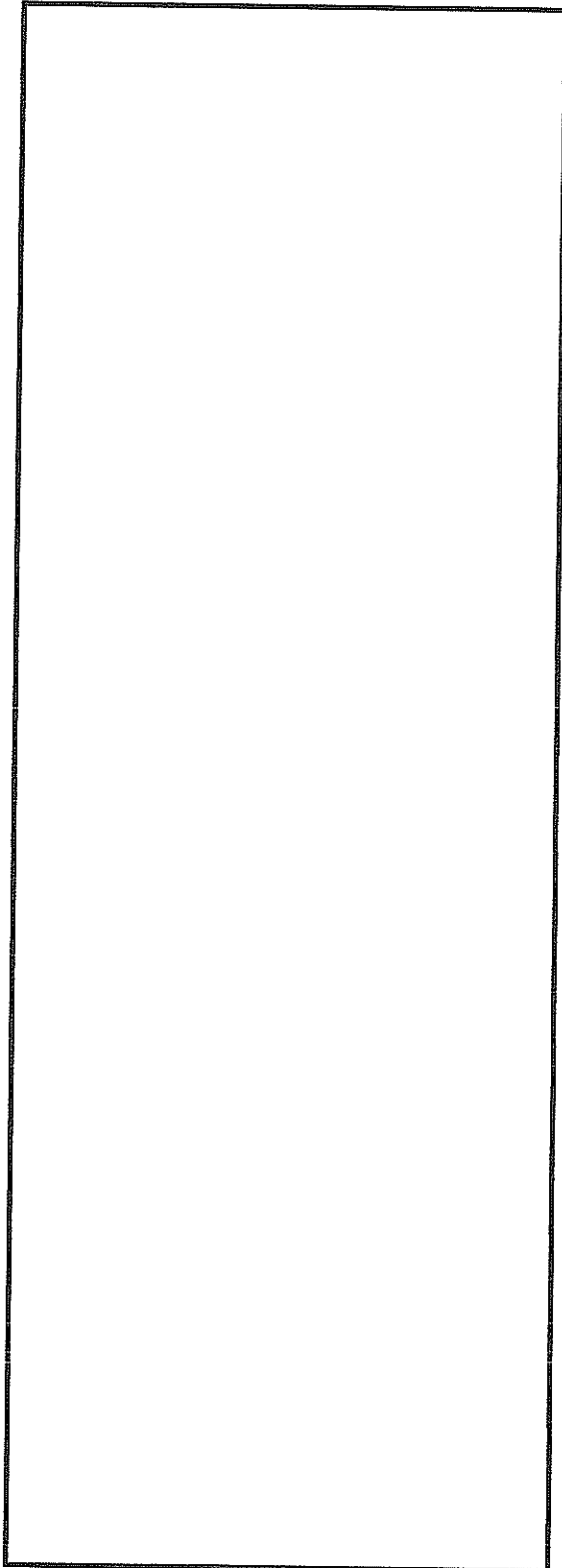
- a. Boredom.
- b. Confusion.
- c. Sadness.
- d. Anger.
- e. Fear.
- f. Anticipation.
- g. Pleasure.
- h. Pain.
- i. Enjoyment.
- j. Frustration.
- k. Affection.
- l. Happiness.



**C. Receptive Language Skills.**

1. General Information:

- a. Does the person understand spoken language, and if "YES," describe briefly.
- b. Approximately what size of receptive vocabulary (small, average for age) does the person have?
- c. What level of complexity of directions can the person follow (1-2-3-multi-stepped)?
- d. Does the person listen when others speak?
- e. How much of what is said (or signed) does the person understand (all, much, some, little, none)?
- f. Does the person understand more of what is said or signed when accompanied by gestures?
- g. Does the person understand more when what is said or signed is in the appropriate context?
- h. Describe the conditions under which the person seems to understand what is said or signed.
- i. What level of conversation does the person understand and participate?
- j. How does the person indicate that he / she understands what is being said?



## COGNITIVE / ACADEMIC DOMAIN

A. **General Level of Functioning.** (Describe the person's general level of cognitive functioning as reported in formal cognitive testing. Be sure to include the names of the tests, the dates, and the general results. Describe briefly specific strengths and weaknesses as described in the formal testing.

B. **Reading Skills.** Describe the person's reading abilities. What is the person's reading grade level \_\_\_\_? What is the person's spelling grade level \_\_\_\_? What is the person's reading comprehension grade level \_\_\_\_? Is the person able to READ his / her first name \_\_\_\_, last name \_\_\_\_? Does the person recognize safety words \_\_\_\_? Does the person read the news paper \_\_\_\_, want ads \_\_\_\_, recipes \_\_\_\_, simple instructions \_\_\_\_? Does the person read as a leisure time activity \_\_\_\_, use public library \_\_\_\_, use a dictionary \_\_\_\_, use telephone book \_\_\_\_?

C. **Writing Skills.** Describe the person's writing abilities. Does the person copy own name \_\_\_\_, print own name \_\_\_\_, write own signature \_\_\_\_, copy own address \_\_\_\_, write own address \_\_\_\_, copy own telephone number \_\_\_\_, write own telephone number \_\_\_\_, write a simple sentence \_\_\_\_, write simple letters \_\_\_\_, address an envelope \_\_\_\_, mail a letter \_\_\_\_, put a stamp on a letter \_\_\_\_, write legibly \_\_\_\_, print \_\_\_\_, write in cursive \_\_\_\_, use correct capitalization \_\_\_\_, spell correctly \_\_\_\_?

D. **NUMBER SKILLS.** Describe the person's math abilities. The person's math skills are at the \_\_\_\_ Grade Level. The person can count to \_\_\_\_\_. The person is able to add \_\_\_\_\_, subtract \_\_\_\_\_, multiply \_\_\_\_\_, divide \_\_\_\_\_? The person can name the following coins: penny \_\_\_\_\_, nickel \_\_\_\_\_, dime \_\_\_\_\_, quarter \_\_\_\_\_, half dollar \_\_\_\_\_? The person can name the following paper currency: \$1 \_\_\_\_\_, \$5 \_\_\_\_\_, \$10 \_\_\_\_\_, \$20 \_\_\_\_\_, \$50 \_\_\_\_\_, \$100 \_\_\_\_\_? The person knows the relative values of money \_\_\_\_\_? The person can make change \_\_\_\_\_? The person can count out amount equal to written price \_\_\_\_\_? The person pays for items with enough money to cover cost \_\_\_\_\_? The person uses calculator \_\_\_\_\_?

**MEASUREMENT.** Does the person seem to understand the CONCEPTS OF length \_\_\_\_\_, weight \_\_\_\_\_, quantity \_\_\_\_\_, more \_\_\_\_\_, less \_\_\_\_\_? Does the person use measurement tools \_\_\_\_\_? Does the person measure lines in feet / inches \_\_\_\_\_? Does the person measure liquids \_\_\_\_\_? Does the person use a bathroom scale \_\_\_\_\_?

## General Information

**TIME.** Identifies day and night \_\_\_\_? Identifies time of day \_\_\_\_? Tells time by hour \_\_\_\_? Tells time by half hour \_\_\_\_? Tells time by quarter hour \_\_\_\_? Tells time in five minute intervals \_\_\_\_? Tells time by minute \_\_\_\_? Sets time on clock or watch \_\_\_\_? Sets alarm \_\_\_\_? Arises with alarm \_\_\_\_? Arrives on time for appointments \_\_\_\_?

**CALENDAR.** Is the person able to name the present day of week \_\_\_\_? Does the person differentiate today \_\_\_\_, tomorrow \_\_\_\_, yesterday \_\_\_\_? Can the person identify days of week on calendar \_\_\_\_? Does the person name months in sequential order \_\_\_\_? Can the person identify the present month of the year \_\_\_\_? Can the person identify months of the year on calendar \_\_\_\_? Can the person name the seasons \_\_\_\_, identify the present season \_\_\_\_, identify the month and season of common holidays \_\_\_\_? Can the person state own birthday \_\_\_\_, locate own birthday on calendar \_\_\_\_? Can the person state the present year \_\_\_\_, today's date \_\_\_\_? Can the person describe information about weekend \_\_\_\_?

- E. Matching Skills / Recognition of Pictures.** Describe the person's ability to match objects, to match events, to match pictures to real world events. Describe the person's ability to recognize pictures.

## SELF CARE DOMAIN

In this section, describe the person's abilities in the following areas. Rate each of the statements below using these *Level of Assistance Codes*: 0 = Independent; 1 = Verbal Reminders; 2 = Gestural Assistance; 3 = Modelling; 4 = Light Physical Assistance; 5 = Full Physical Assistance; 6 = Hand Over Hand Assistance; 7 = N/A

- A. Eating Skills.** Eats with spoon \_\_\_\_, Eats with fork \_\_\_\_, Spreads with knife \_\_\_\_, Uses napkin \_\_\_\_, Drinks from glass \_\_\_\_, Uses good posture \_\_\_\_, Chews \_\_\_\_, Asks for assistance \_\_\_\_.
- B. Dressing and Undressing Skills.** Puts on pants \_\_\_\_, underwear \_\_\_\_, socks \_\_\_\_, dress \_\_\_\_, nylons \_\_\_\_, pullover shirt \_\_\_\_, blouse/shirt \_\_\_\_, ties shoes \_\_\_\_, laces shoes \_\_\_\_, buttons \_\_\_\_, zips \_\_\_\_, snaps \_\_\_\_, Removes pants \_\_\_\_, underwear \_\_\_\_, socks \_\_\_\_, dress \_\_\_\_, nylons \_\_\_\_, pullover shirt \_\_\_\_, blouse/shirt \_\_\_\_, shoes \_\_\_\_, Selects clothing \_\_\_\_, Changes clothing \_\_\_\_.
- C. Toileting Skills.** Urinates in toilet \_\_\_\_, bowel movements in toilet \_\_\_\_, flushes toilet \_\_\_\_, cleans properly following elimination \_\_\_\_, washes after elimination \_\_\_\_, remains dry through night \_\_\_\_.

Describe the Person's Schedule of Toileting:

- D. Bathing Skills.** Enters tub/shower \_\_\_\_, washes hands & face \_\_\_\_, washes body parts \_\_\_\_, uses soap \_\_\_\_, rinses \_\_\_\_, dries \_\_\_\_, washes after meals \_\_\_\_, regulates temperature \_\_\_\_, applies deodorant \_\_\_\_.

## General Information

- E. Oral Hygiene.** Applies toothpaste \_\_\_\_\_, brushes teeth \_\_\_\_\_, rinses mouth \_\_\_\_\_, gargles water \_\_\_\_\_, uses dental floss \_\_\_\_\_.
- F. Nasal Hygiene.** Blows nose \_\_\_\_\_, carries tissue \_\_\_\_\_, wipes nose \_\_\_\_\_, keeps nose clean \_\_\_\_\_, uses handkerchief \_\_\_\_\_.
- G. Grooming.** Brushes hair \_\_\_\_\_, combs hair \_\_\_\_\_, washes hair with shampoo \_\_\_\_\_, washes hair with water \_\_\_\_\_, uses mirror during grooming \_\_\_\_\_, proper hair style \_\_\_\_\_, uses hair dryer \_\_\_\_\_, uses hair curlers \_\_\_\_\_, applies makeup \_\_\_\_\_, uses tweezers \_\_\_\_\_, keeps nails clean \_\_\_\_\_, trims nails \_\_\_\_\_, files nails \_\_\_\_\_.
- H. Shaving Skills.** Applies shaving soap \_\_\_\_\_, applies shaving lotion \_\_\_\_\_, inserts blade \_\_\_\_\_, shaves all surfaces \_\_\_\_\_, cleans after shaving \_\_\_\_\_, uses electric razor \_\_\_\_\_, shaves legs \_\_\_\_\_, shaves arms \_\_\_\_\_, trims sideburns \_\_\_\_\_.
- I. Menstrual Cycle.** Recognizes onset of cycle \_\_\_\_\_, applies napkin \_\_\_\_\_, disposes of napkin \_\_\_\_\_, changes napkin \_\_\_\_\_, maintains proper hygiene, keeps menstrual calendar \_\_\_\_\_.

## DOMESTIC SKILLS DOMAIN

In this section, describe the person's abilities in the following areas. Rate each of the statements below using these *Level of Assistance Codes*: 0 = Independent; 1 = Verbal Reminders; 2 = Gestural Assistance; 3 = Modelling; 4 = Light Physical Assistance; 5 = Full Physical Assistance; 6 = Hand Over Hand Assistance; 7 = N/A

- A. Kitchen Maintenance.** Empties garbage \_\_\_\_\_, sweeps floor \_\_\_\_\_, mops floor \_\_\_\_\_, waxes floor \_\_\_\_\_, washes and rinses dishes \_\_\_\_\_, dries dishes \_\_\_\_\_, operates dishwasher \_\_\_\_\_, sorts utensils \_\_\_\_\_, puts utensils away \_\_\_\_\_, puts dishes away \_\_\_\_\_, cleans sink \_\_\_\_\_, clears and wipes counter \_\_\_\_\_, wipes appliances \_\_\_\_\_, operates disposal \_\_\_\_\_.
- B. Bedroom Maintenance.** Makes bed \_\_\_\_\_, changes linen \_\_\_\_\_, empties wastepaper basket \_\_\_\_\_, hangs up clothing \_\_\_\_\_, places clothing in drawers \_\_\_\_\_, picks up clothing \_\_\_\_\_.
- C. Living Room Maintenance.** Vacuums rug/floor \_\_\_\_\_, dusts furniture \_\_\_\_\_, polishes furniture \_\_\_\_\_, empties ashtrays \_\_\_\_\_, clears furniture \_\_\_\_\_, cleans windows \_\_\_\_\_.
- D. Bathroom Maintenance.** Cleans tub/shower \_\_\_\_\_, cleans toilet \_\_\_\_\_, hangs up towels \_\_\_\_\_, replaces toilet paper as needed \_\_\_\_\_.
- E. Outdoor Maintenance.** Waters lawn/plants with hose \_\_\_\_\_, waters with sprinkler \_\_\_\_\_, cuts lawn with hand mower \_\_\_\_\_, cuts lawn with power mower \_\_\_\_\_, rakes lawn \_\_\_\_\_, trims hedges and shrubs \_\_\_\_\_, puts trash container out for collection \_\_\_\_\_, hoses or sweeps driveway and sidewalk \_\_\_\_\_.

- F. Laundry Skills.** Identifies dirty clothes \_\_\_\_\_, sorts clothing \_\_\_\_\_, loads machine \_\_\_\_\_, selects proper washing cycle \_\_\_\_\_, measures detergent \_\_\_\_\_, starts washer \_\_\_\_\_, transfers clothing from washer to dryer \_\_\_\_\_, starts dryer \_\_\_\_\_, removes clothing from dryer \_\_\_\_\_, folds clothing \_\_\_\_\_, stores clothing \_\_\_\_\_, selects hand washables \_\_\_\_\_, selects clothing for ironing \_\_\_\_\_, sets up ironing board \_\_\_\_\_, fills iron with water \_\_\_\_\_, uses iron \_\_\_\_\_, uses spray starch \_\_\_\_\_, uses bleach when needed \_\_\_\_\_.
- G. Meal Time Skills.** Uses oven \_\_\_\_\_, sets oven temp. \_\_\_\_\_, uses can opener \_\_\_\_\_ uses knives safely \_\_\_\_\_, prepares simple meals \_\_\_\_\_, operates stove safely \_\_\_\_\_, discerns perishable and nonperishable \_\_\_\_\_, distinguishes frozen from non-frozen foods \_\_\_\_\_, follows simple recipe \_\_\_\_\_, measures quantities \_\_\_\_\_, makes breakfast \_\_\_\_\_, makes sandwich \_\_\_\_\_, plans meal \_\_\_\_\_. Uses Appliances, toaster \_\_\_\_\_, mixer \_\_\_\_\_, broiler \_\_\_\_\_, coffee pot \_\_\_\_\_, stove timer \_\_\_\_\_. Uses Utensils, frying pan \_\_\_\_\_, cookie sheet \_\_\_\_\_, grater \_\_\_\_\_, ladle \_\_\_\_\_, colander \_\_\_\_\_, wine opener \_\_\_\_\_. Mealtime Tasks, sets table \_\_\_\_\_, serves meal \_\_\_\_\_, clears table \_\_\_\_\_, scrapes plates \_\_\_\_\_, rinses dishes \_\_\_\_\_, stacks dishes after meal \_\_\_\_\_, wipes table \_\_\_\_\_, stores food properly \_\_\_\_\_, wraps food properly \_\_\_\_\_.

## COMMUNITY SKILLS DOMAIN

In this section, describe the person's abilities in the following areas. Rate each of the statements below using these *Level of Assistance Codes*: 0 = Independent; 1 = Verbal Reminders; 2 = Gestural Assistance; 3 = Modelling; 4 = Light Physical Assistance; 5 = Full Physical Assistance; 6 = Hand Over Hand Assistance; 7 = N/A

- A. Telephone Skills.** Reads telephone number \_\_\_\_\_, dials number \_\_\_\_\_, answers telephone \_\_\_\_\_, knows own telephone number \_\_\_\_\_, recognizes busy signal \_\_\_\_\_, makes local calls \_\_\_\_\_, uses appropriate telephone language \_\_\_\_\_, dials information \_\_\_\_\_, uses pay phone \_\_\_\_\_, makes long-distance calls \_\_\_\_\_, uses phone for social calls \_\_\_\_\_, makes collect calls \_\_\_\_\_, telephones for assistance \_\_\_\_\_.
- B. Personal Identification.** Identifies self \_\_\_\_\_, carries identification card \_\_\_\_\_, carries bus pass \_\_\_\_\_, carries social security card \_\_\_\_\_, knows own address \_\_\_\_\_.
- C. Community Mobility. Walking.** recognizes crosswalk \_\_\_\_\_, looks both ways before crossing \_\_\_\_\_, crosses with lights \_\_\_\_\_, walks on sidewalk \_\_\_\_\_, walks on shoulder of road \_\_\_\_\_, finds way home \_\_\_\_\_. Bus. catches bus on time \_\_\_\_\_, walks to bus stop \_\_\_\_\_, identifies bus stop \_\_\_\_\_, identifies proper bus \_\_\_\_\_, boards correct bus \_\_\_\_\_, shows bus pass \_\_\_\_\_, deposits correct amount \_\_\_\_\_, requests transfer \_\_\_\_\_, acts properly on bus \_\_\_\_\_, signals driver to stop at correct destination \_\_\_\_\_, completes transfer to correct bus \_\_\_\_\_, gets off at correct destination \_\_\_\_\_.
- D. Shopping Skills.** Expresses need \_\_\_\_\_, buys simple items \_\_\_\_\_, prepares shopping list \_\_\_\_\_, uses shopping cart \_\_\_\_\_, selects items on shopping list \_\_\_\_\_, buys fresh food, buys seasonal items \_\_\_\_\_, buys healthful food \_\_\_\_\_, shops for food for several days \_\_\_\_\_, buys clothing \_\_\_\_\_, shops for bargains \_\_\_\_\_, makes purchase \_\_\_\_\_, gives money \_\_\_\_\_, waits for change \_\_\_\_\_, receives correct change \_\_\_\_\_, stays within limits of budget \_\_\_\_\_, exchanges items \_\_\_\_\_, appropriate behavior in stores \_\_\_\_\_.

- E. Money Management.** Endorses check \_\_\_\_\_, cashes check \_\_\_\_\_, identify amount of check \_\_\_\_\_, opens bank account \_\_\_\_\_, maintains savings account \_\_\_\_\_, writes check \_\_\_\_\_, records check in register \_\_\_\_\_, computes balance \_\_\_\_\_, fills out deposit slip \_\_\_\_\_, balances monthly statement \_\_\_\_\_, maintains charge account \_\_\_\_\_, pays own bills on time \_\_\_\_\_, keeps important receipts \_\_\_\_\_, maintains budget \_\_\_\_\_. Basic. Realizes value of money \_\_\_\_\_, identifies currency \_\_\_\_\_, identifies coins \_\_\_\_\_, knows relative values of currency/coins \_\_\_\_\_, reads price tags \_\_\_\_\_.

### LEISURE SKILL / RECREATIONAL DOMAIN

What does the person do with his / her leisure time? Use the following codes to indicate whether or not, and how much the person is involved in the activities described below: 0 = not at all, 1 = infrequently, 2 = on occasion, 3 = frequently, 4 = very frequently.

- A. Indoor Activities.** Television \_\_\_\_\_, listens to radio \_\_\_\_\_, listens to music \_\_\_\_\_, painting \_\_\_\_\_, works with clay \_\_\_\_\_, drawing \_\_\_\_\_, sewing \_\_\_\_\_, embroidery \_\_\_\_\_, crochet \_\_\_\_\_, knitting \_\_\_\_\_, exercise \_\_\_\_\_, board games \_\_\_\_\_, cards \_\_\_\_\_, puzzles \_\_\_\_\_, ping pong \_\_\_\_\_, pool \_\_\_\_\_, plays with pet \_\_\_\_\_, indoor plants \_\_\_\_\_, reads newspaper \_\_\_\_\_ invites friends over \_\_\_\_\_.
- B. Community/Outdoor Activities.** Jogging \_\_\_\_\_, gardening \_\_\_\_\_, movies \_\_\_\_\_, competitive sports \_\_\_\_\_, hiking \_\_\_\_\_, camping \_\_\_\_\_, attends parties \_\_\_\_\_, dancing \_\_\_\_\_.
- C. Other.** Briefly describe any other activities in which the person might participate during free time, and leisure activities.

### MOTOR ACTIVITY DOMAIN

- A. Motor Activity.** Describe the person's general level of activity. Does the person manifest an average rate of activity compared to others? Is the person overly active compared to others? Would you describe the person as restless, or fidgety? Does the person seem to wander aimlessly? Does the person seem to get into things frequently? What are the conditions under which the person is most active? Least active?
- B. Attention Span and Distractibility.** Describe the person's ability to sustain attention. Does the person have a short attention span? How long is the person able to sustain attention on a preferred activity? Nonpreferred activity? Would you describe the person as distractible?

## General Information

- C. Tics and Habitual Mannerisms.** Does the person manifest any of the following perseverative motor activities? Twitches of the face and shoulders? Blinking? Sucking? Sucks thumb? Nail biting? Head-banging? Picking? Gesturing? Stereotyped Behaviors, e.g., twirling, gazing, lining objects, touching, licking? If "YES," describe briefly.

### EMOTIONAL DOMAIN

- A.** Does the person show signs of anger? Does the person have temper tantrums, and / or engage in property destruction? How does he/she manifest anger? How does he/she manifest frustration? Can he / she communicate these emotions, and how? How intense are these? Would you describe the person as an angry person?
- B.** Does the person cry, seem to be depressed, or unhappy? How does he / she express unhappiness? Is client described as unhappy, miserable? How often are these emotions expressed?
- C.** Does the person have fears? If "YES" what is the person afraid of? (Night, animals, objects, places).
- D.** Does the person show affection? If "YES" how is affection shown? How does the person respond to attempts to give affection? Does the person seem to enjoy, or just tolerate touching or hugging? Does the person seem to have developed relationships with others (e.g., fondness, bonding)? Does the person become upset when separated from certain people? Who?
- E.** Does the person show signs of happiness? How is happiness expressed (e.g., smiles, laughs, jokes)?

### **SOCIAL SKILLS DOMAIN**

A. In general, DESCRIBE the person's INTERACTIONS with others.

B. What are the person's RELATIONSHIPS with and preferences for the following groups:

Siblings?

Peers?

Teachers?

Parents?

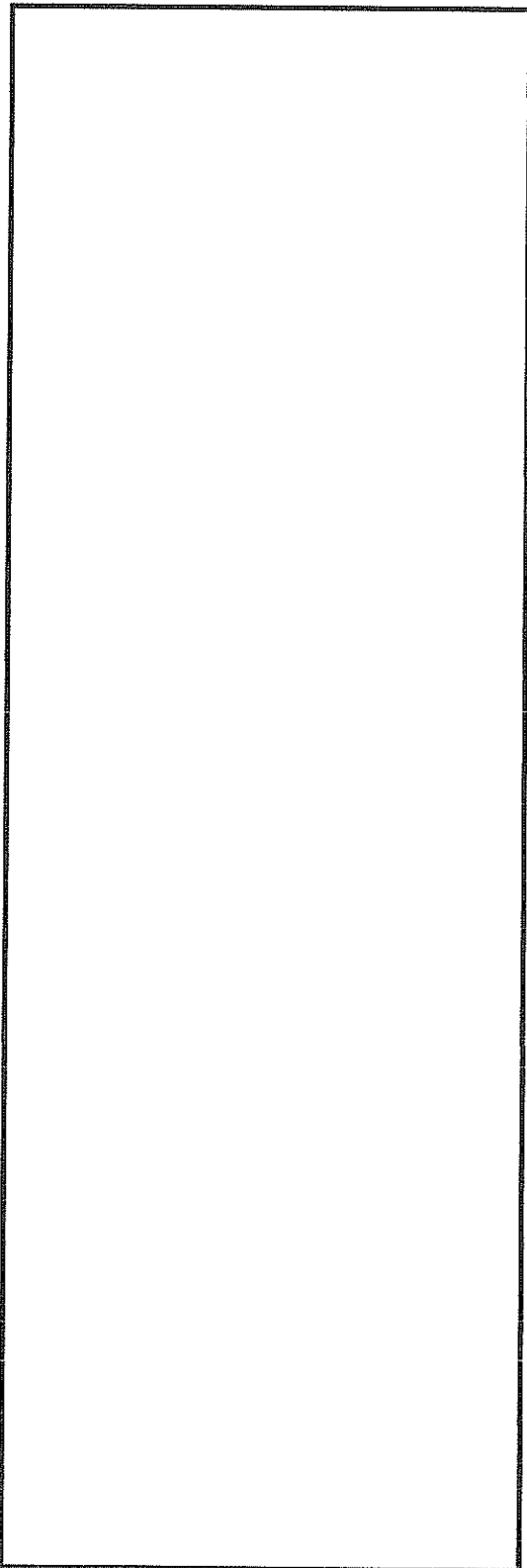
Animals?

Others?

C. Does the person HAVE FRIENDS? If so, give their names and describe the amount of time spent with them? Describe the quality of interaction with these individuals.

D. Does the person have difficulty INITIATING and / or MAINTAINING friendships? What difficulties does the person have in this area?

E. DESCRIBE the person's ASSETS or TALENTS in the area of socialization (e.g., respects others, respects property, is accepted by others, is asked to participate in social activities by others, popular with peers).



General Information

F. Describe the person's UNDESIRABLE social traits.

G. Does the person show any interest in SEX? If so, how?

H. Does the person have a good understanding of SEX (e.g., function, method, safety, social acceptability)?

