

Summer Registration 2009

Client Name:

Date of birth:

Date:

Communication Skills

What are your child's current communication skills?

Do you use any communication tools such as PECS or visual schedules at home or school?

Interests

What are your child's ...
Strengths?

Challenges?

Interests?

Dislikes?

What, if anything does your child persevere on?

Behaviors

What does your child do when upset?

Are there any phrases or activities that are generally calming to your child?

Does your child have any fears or sensitivities we should be aware of?

What are some of the current goals you have for your child (school or home)?
(list 3)

1.

2.

3.

Name:

Phone: Home:

Cell:

Work:

Address:

Email: