ABOUT MY CHILD

Child’s Name: __________________________ Date: ________________

ACADEMIC - Consider: Levels of knowledge and development in subject and skill areas including activities of daily living, level of intellectual functioning, adaptive behavior, expected rate of progress in acquiring skills and information and learning style.

Strengths, Preferences, Interests: ______________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Needs: _____________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

SOCIAL - Consider: The degree (extent) and quality of the student’s relationships with peers and adults, feelings about self; social adjustment to school and in community environments.

Strengths, Preferences, Interests: ______________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Needs: _____________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Document created by Parent Network of WNY.
PHYSICAL - Consider: The degree (extent) and quality of the student’s motor and sensory development, health, vitality, physical skills or limitations which pertain to the learning process.

Strengths, Preferences, Interests: ____________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

Needs: _________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

MANAGEMENT NEEDS - The nature (type) and degree (extent) to which environmental and human or material resources are needed to address needs identified above (what supports, places and stuff has worked in the past):

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________

______________________________________________________________________________________
MEDICAL – Consider: Physical information - how a diagnosis impacts on education and participation as a member of a class or school.

Strengths: ______________________________________________________

___________________________

___________________________

Weaknesses / Needs: ____________________________________________

___________________________

___________________________

EFFECTIVE STRATEGIES - What worked and/or what didn’t work in the last year?

___________________________

___________________________

GOAL(S) – What the family sees as being the most important for the next year?

___________________________

___________________________

ACTIVITIES of daily living – What skills need to be addressed? __________________________

___________________________

___________________________

___________________________
CURRENT INTERESTS – What does the child like right now? ____________________________


EFFECTIVE REWARDS – What motivates the child? ________________________________


OTHER INFORMATION – Anything that may be helpful for others to know about my child.


