

## THE CHILDREN'S CENTER - ASSISTIVE TECHNOLOGY DEMONSTRATION REPORTING FORM

Date: _____	Discipline: _____
<p><b>After the AT demonstration today, the family/professional:</b></p> <p><input type="checkbox"/> decided 1 or more AT device(s) <b>will</b> meet the child's needs</p> <p><input type="checkbox"/> decided <b>none</b> of the AT devices will meet the child's needs</p> <p><input type="checkbox"/> have not made a decision</p>	<p><b>Level of satisfaction with the AT demonstration today:</b></p> <p><input type="checkbox"/> highly satisfied</p> <p><input type="checkbox"/> satisfied</p> <p><input type="checkbox"/> satisfied somewhat</p> <p><input type="checkbox"/> not satisfied</p>

ASSISTIVE TECHNOLOGY (AT): CATEGORY	AT DEVICES: USED FOR ASSESSMENT	ASSISTIVE TECHNOLOGY (AT): CATEGORY	AT DEVICES: USED FOR ASSESSMENT
<p><b>1. <u>Mobility:</u></b> Equipment to promote independent or assisted movement.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>2. <u>Positioning:</u></b> Supports needed to maintain body or joint alignment.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
<p><b>3. <u>Self-care:</u></b> Devices to assist with eating, bathing, dressing, and toileting.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>4. <u>Assistive Listening:</u></b> Aids or devices to facilitate the enhancement or interpretation of auditory information.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
<p><b>5. <u>Communication:</u></b> Strategies and/or technology for communication with others.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>6. <u>Vision:</u></b> Aids or devices to facilitate the enhancement or interpretation of visual information.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
<p><b>7. <u>Play/Environmental Controls</u></b> Technology to promote play opportunities and experiences alone or with others. Equipment that provides a way to assist the child to independently control appliances and fixtures.</p>	<p><b>Switches</b></p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>Switch Accessories (SLATs, etc.)</b></p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><b>Switch Mounting</b></p> <p><input type="checkbox"/> Sensitrac Pad-Adjustable Arm</p> <p><input type="checkbox"/> Gooseneck Mounting</p> <p><input type="checkbox"/> _____</p>	<p><b>Switch Activated Devices</b></p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><b>Resources</b></p> <p><input type="checkbox"/> Play and Learn</p> <p><input type="checkbox"/> _____</p>

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<p><b>8. <u>Computer Access:</u></b></p> <p>Programs or devices to allow a child to use a computer for play or learning.</p>	<p><input type="checkbox"/> KidTrac</p> <p><input type="checkbox"/> Everybody Has Feet</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>9. <u>Early Reading:</u></b></p> <p>Aids or devices to promote the development of reading.</p>	<p><input type="checkbox"/> BookWorm</p> <p><input type="checkbox"/> Storytime Book &amp; CD</p> <p><input type="checkbox"/> First Words</p> <p><input type="checkbox"/> First Categories</p> <p><input type="checkbox"/> Simple Sentences</p> <p><input type="checkbox"/> _____</p>
<p><b>10. <u>Early Writing:</u></b></p> <p>Aids or devices to promote the development of writing.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	<p><b>11. <u>Early Math:</u></b></p> <p>Aids or devices that promote the development of math skills.</p>	<p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>

**Comments:**

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