

UI REACH: Realizing Educational and Career Hopes

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BEHAVIORAL ASSESSMENT

This form should be completed by the parent/guardian or primary caregiver. Please honestly evaluate the student's ability in each of the areas below. You may place a checkmark in the *Don't Know* column if you do not have information necessary to evaluate the student for a specific skill. **Please type or print legibly.**

Student Name: _____ Form completed by: _____

| Independent Living Skills | Completely Independent | Minimal Assistance | Moderate Assistance | Complete Assistance | Don't Know |
|--|------------------------|--------------------|---------------------|---------------------|------------|
| Exercises good grooming behaviors—brushes hair, shaves daily | | | | | |
| Showers independently on a daily basis | | | | | |
| Exhibits good hygiene—brushes teeth, trims nails, washes hands | | | | | |
| Uses an alarm to wake up; goes to sleep at a reasonable time | | | | | |
| Budgets time and uses a schedule | | | | | |
| Understands time needed to complete different tasks (e.g., cleaning room, personal care, homework) | | | | | |
| Prepares a simple, healthy meal; packs a lunch | | | | | |
| Utilizes kitchen appliances to prepare meals | | | | | |
| Cleans kitchen area and dishes after eating | | | | | |
| Does laundry—uses a washing machine, dryer, and iron | | | | | |
| Maintains a clean and organized living area—ie., makes bed daily, puts clothes away | | | | | |
| Is able to stay home alone | | | | | |
| Understands emergency procedures | | | | | |

Please include any additional comments on independent living skills: _____

| Interpersonal Skills | Completely Independent | Minimal Assistance | Moderate Assistance | Complete Assistance | Don't Know |
|---|------------------------|--------------------|---------------------|---------------------|------------|
| Greets people appropriately | | | | | |
| Communicates needs and opinions to others effectively | | | | | |
| Engages in informal conversations | | | | | |
| Establishes and maintains relationships with friends | | | | | |
| Enjoys spending time alone with friends | | | | | |
| Engages in social activities independently | | | | | |
| Plans social events | | | | | |
| Responds appropriately to authority figures | | | | | |
| Has ability to problem solve | | | | | |
| Recognizes & manages his/her emotions | | | | | |
| Recognizes & responds appropriately to the emotions of others | | | | | |
| Uses a cell phone | | | | | |

Please include any additional comments on interpersonal skills: _____

| Community/Life Skills | Completely Independent | Minimal Assistance | Moderate Assistance | Complete Assistance | Don't Know |
|---|-------------------------------|---------------------------|----------------------------|----------------------------|-------------------|
| Manages personal belongings—including carrying an ID in public | | | | | |
| Uses a bank account | | | | | |
| Uses personal money for spending | | | | | |
| Handles the exchange of money—bills and coins | | | | | |
| Creates and follows a weekly/monthly budget | | | | | |
| Understands responsibility of paying bills | | | | | |
| Schedules necessary appointments | | | | | |
| Shops for food or apparel | | | | | |
| Uses public transportation to get to/from work or school on public transportation | | | | | |
| Demonstrating safety awareness when among strangers | | | | | |
| Uses community resources | | | | | |
| Knows how to find help when needed | | | | | |

Please include any additional comments on community and life skills: _____

| Career Skills | Completely Independent | Minimal Assistance | Moderate Assistance | Complete Assistance | Don't Know |
|---|-------------------------------|---------------------------|----------------------------|----------------------------|-------------------|
| Attends work regularly | | | | | |
| Arrives on time and takes appropriate breaks | | | | | |
| Dresses appropriately for job and weather | | | | | |
| Meets hygiene expectations in the work environment | | | | | |
| Cooperates with supervisor | | | | | |
| Able to work as a team member and get along with co-workers | | | | | |
| Follows written directions | | | | | |
| Follows verbal directions | | | | | |
| Asks questions/for clarification when needed | | | | | |
| Completes assigned work tasks | | | | | |
| Follows appropriate safety procedures | | | | | |
| Recognizes areas that need improvement | | | | | |
| Works to improve performance | | | | | |
| Responds to feedback appropriately | | | | | |

Please include any additional comments on career skills: _____

| Computer Skills | Completely Independent | Minimal Assistance | Moderate Assistance | Complete Assistance | Don't Know |
|--|-------------------------------|---------------------------|----------------------------|----------------------------|-------------------|
| Turns computer and accessories on and off | | | | | |
| Uses a mouse to move the cursor, drag an object, or switch programs | | | | | |
| Composes and type a paragraph in a word processing program | | | | | |
| Starts up and uses browser to access information on the web | | | | | |
| Logs into a computer station and e-mail account | | | | | |
| Uses common e-mail functions such as creating, sending, and replying | | | | | |
| Uses Facebook or other electronic social networks | | | | | |

Please include any additional comments on computer skills: _____

Please rate the student on each of the characteristics in the areas of school, job, and home. Please consider the specific setting for each of the qualities or skills. For any areas you do not feel qualified to provide a response, write N/A in the specific blank.

QUALITIES

GENERAL: SCALE: (LOW) 1, 2, 3, 4, 5 (HIGH)

| | <u>SCHOOL</u> | <u>JOB</u> | <u>HOME</u> |
|------------------------------|----------------------|-------------------|--------------------|
| Initiative | _____ | _____ | _____ |
| Responsibility | _____ | _____ | _____ |
| Maturity | _____ | _____ | _____ |
| Reliability | _____ | _____ | _____ |
| Ability to use good judgment | _____ | _____ | _____ |
| Determination | _____ | _____ | _____ |
| Attitude | _____ | _____ | _____ |

Comments--describe qualities that need further development: _____

EMOTIONAL ADAPTABILITY: SCALE: (LOW) 1, 2, 3, 4, 5 (HIGH)

| | <u>SCHOOL</u> | <u>JOB</u> | <u>HOME</u> |
|--|----------------------|-------------------|--------------------|
| Ability to cope with stress | _____ | _____ | _____ |
| Adjusts well to newer situations or environments | _____ | _____ | _____ |
| Ability to keep problems in perspective | _____ | _____ | _____ |

Comment on types of situations that are stressful for student and coping mechanisms used: _____

INTERPERSONAL: SCALE: (LOW) 1, 2, 3, 4, 5 (HIGH)

| | <u>SCHOOL</u> | <u>JOB</u> | <u>HOME</u> |
|--|----------------------|-------------------|--------------------|
| Ability to relate to teachers | _____ | _____ | _____ |
| Ability to relate to young children | _____ | _____ | _____ |
| Ability to relate and interact with same-age peers | _____ | _____ | _____ |
| Ability to relate to elderly people | _____ | _____ | _____ |
| Ability to relate to people with disabilities | _____ | _____ | _____ |
| Maintains positive relationships with adults | _____ | _____ | _____ |

Comment on style of interaction and specific strengths and weaknesses: _____