

***\*\*Submit this form in Week 2 for the Coaching Activity***

### Student Observation Form

**Student:**

**School:**

**Grade:**

**Date:**

**Physical Environment:**

Where is the student's desk located? \_\_\_\_\_

Is there a quiet area to work in the room? \_\_\_\_\_

What is the lighting like? Is it possible to turn off overhead fluorescent lighting?  
Can the student be faced away from direct light (e.g., windows)?

\_\_\_\_\_

Is there a posted schedule which tends to be followed daily? \_\_\_\_\_

**Teacher:**

Lesson observed:

Whole group \_\_\_; Small group \_\_\_; Discussion \_\_\_; Individual assignments \_\_\_

Does the teacher interact with the focus student? \_\_\_ If yes, describe:

\_\_\_\_\_

Does the teacher cue the class when it is time to transition to the next activity?  
What types of external cues are given for transitions (e.g., lights off/on; clapping)

\_\_\_\_\_

**Educational Assistant:**

Role with the focus student: \_\_\_\_\_

Working on specific skill development \_\_\_; behaviour management \_\_\_;  
personal care \_\_\_; other \_\_\_\_\_

Does the assistant work with any other students?

\_\_\_\_\_

**Student Behaviour:**

Is the student engaged with the task? Yes \_\_\_ No \_\_\_ Unclear \_\_\_

Does the student appear to understand the instructional content?

Yes \_\_\_ No \_\_\_ Unclear \_\_\_

Is the student's behaviour appropriate? Yes \_\_\_ No (describe)

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Is there a way for the student to seek the teacher's attention? \_\_\_\_\_

Is the student interacting with peers? Yes (describe) \_\_\_\_\_

No (explain) \_\_\_\_\_

Does the student observe others to see what to do? Yes \_\_\_ No \_\_\_ Unclear \_\_\_

Does the student transition successfully between activities?

Yes \_\_\_ No (describe) \_\_\_\_\_

Does the student manage waiting (e.g., for help, for a turn)? Yes \_\_\_ No \_\_\_

(describe) \_\_\_\_\_

Are there opportunities for the student to make choices? If so, describe:

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Does the student have clean-up responsibilities? \_\_\_\_\_

What kinds of self-care tasks is the student involved in? \_\_\_\_\_

What appears to motivate the student? \_\_\_\_\_

What appears to frustrate the student? \_\_\_\_\_

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**Use of Assistive Technology**

Does the student use any of the following?

- Pencil/pen/marker with adaptive grip

- Universal cuff to hold crayons, marker, paint brush
- Modified utensils (e.g., stampers, scissors)
- Slantboard
- Nonslip surface to prevent slipping (e.g., Dycem)
- Portable word processor
- Computer
  - Special Keyboard (e.g., Intellikeys; describe)
  - Keyguard
  - TrackBall/Joystick/single switch access/other
  - Mouthstick/Head pointer/Head Mouse
  - Direct Selection; Scanning
  - Word Prediction (e.g., Co:Writer)
- Single switch access for toys/appliances/equipment
- Powerlink and switch to turn on electrical appliances (e.g., radio, fan, blender, etc.)

### **Alternative/Augmentative Communication**

Does the student use any of the following?

- Communication Board/book with pictures/letters/words
- Etran board (eye transfer system)
- Simple Voice Output Device (e.g., Step-by-Step Communicator; Cheap Talk; TechTalk; Talking Picture Frame)
- Voice Output Device with levels or dynamic display(e.g., Dynavox; Super Talker)
- Other: \_\_\_\_\_

### **Academic Skills**

Is there a visual schedule (picture or print format)?

Does the student read? \_\_\_\_\_ If so, are there adaptations in terms of text size,

spacing, colour highlighting, etc.? \_\_\_\_\_

Does the student access pictures with text (e.g., PictureIt; Writing with Symbols)

Are books adapted for page turning (e.g., page fluffers, tabs, etc.)

Are electronic books used (e.g., SET-BC accessible books)?

Other observations about academic skills: \_\_\_\_\_

### **Recreation and Leisure**

Does the student use any adapted toys or games?

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Does the student use any adapted sports equipment?

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Does the student play games on the computer?

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Does the student listen to music (on computer, iPod, etc.)?

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**Activities of Daily Living**

Does the student use adaptive eating or drinking devices?

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Does the student use adaptive dressing equipment?

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**Mobility/Positioning**

Does the student use a walker, manual wheelchair; power wheelchair; stander?

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Are there other positioning or seating adaptations (e.g., side lyer, bolsters, etc.)?

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**Sensory Input**

Does the student wear glasses?

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Are there other vision concerns (e.g., cortical visual impairment)?

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Does the student have a hearing loss? Does s/he use a hearing aid?

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Is there classroom amplification?

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Any other pertinent observations that would be helpful in determining appropriate educational plans.