

Observation Form: DCD (checklist format)

Student's Name: _____ Date of Observation: _____
 Grade: _____ Observer's Name: _____
 School: _____ Observation Start Time: _____ End Time: _____
 Class: _____

Levels of Support

Intermittent	Limited	Extensive	Pervasive
-Full participation -“As needed” support -Independent with skill -Consistent performance	-Moderate participation (more than 50% of the time) -Some support -May require verbal prompts -Inconsistent performance	-Moderate participation (less than 50% of the time) -A lot of support (daily and regular) -Requires physical prompts/cues -Partial performance	-No participation -Full support -Physical assistance (hand-over-hand) -Unable to perform

Directions: If a skill is observed, mark with a \surd . Add comments as appropriate.

Daily Living/ Independent Skills:

- | | | |
|---|---|---|
| <input type="checkbox"/> Can make transitions | <input type="checkbox"/> Personal care/hygiene | <input type="checkbox"/> Prepares materials |
| <input type="checkbox"/> Keeps schedules | <input type="checkbox"/> Uses materials safely | <input type="checkbox"/> Seeks assistance |
| <input type="checkbox"/> Advocates for self | <input type="checkbox"/> Makes choices | <input type="checkbox"/> Eating/drinking |
| <input type="checkbox"/> Dressing/undressing skills | <input type="checkbox"/> Uses materials appropriately | <input type="checkbox"/> Toileting |

Estimated Level of Support:

- Intermittent Limited Extensive Pervasive

Comments:

Social and Interpersonal Skills:

- | | | |
|--|--|---|
| <input type="checkbox"/> Appropriate play skills | <input type="checkbox"/> Peer interactions | <input type="checkbox"/> Follows directions |
| <input type="checkbox"/> Takes turns | <input type="checkbox"/> Cooperates | <input type="checkbox"/> Shows appreciation |
| <input type="checkbox"/> Show concern for others | <input type="checkbox"/> Makes requests | <input type="checkbox"/> Displays self-esteem |
| <input type="checkbox"/> Shows social judgment | <input type="checkbox"/> Initiates with adults/peers | <input type="checkbox"/> Problem solving |

Estimated Level of Support:

- Intermittent Limited Extensive Pervasive

Comments:

Communication Skills:

- | | | |
|--|---|---|
| <input type="checkbox"/> Initiates/responds | <input type="checkbox"/> Follow directions | <input type="checkbox"/> Uses gestures |
| <input type="checkbox"/> Understands social cues | <input type="checkbox"/> Requests help | <input type="checkbox"/> Expresses feelings |
| <input type="checkbox"/> Makes comments | <input type="checkbox"/> Expresses wants/needs | <input type="checkbox"/> Protests/rejects |
| <input type="checkbox"/> Gains attention of adults/peers | <input type="checkbox"/> Uses assistive tech. appropriately | <input type="checkbox"/> Makes choices |

Estimated Level of Support:

- Intermittent Limited Extensive Pervasive

Comments:

Academic Skills:

- | | | |
|---|--|--|
| <input type="checkbox"/> Responds to teacher | <input type="checkbox"/> Manages time | <input type="checkbox"/> Able to attend |
| <input type="checkbox"/> Retains concepts | <input type="checkbox"/> Uses survival words | <input type="checkbox"/> Applies skills |
| <input type="checkbox"/> Follows a schedule | <input type="checkbox"/> Uses a calendar | <input type="checkbox"/> Handles money |
| <input type="checkbox"/> Displays life skills | <input type="checkbox"/> Show science knowledge | <input type="checkbox"/> Shows math skills |
| <input type="checkbox"/> Shows basic reading skills | <input type="checkbox"/> Uses basic reading skills | <input type="checkbox"/> Shows basic reading |
| <input type="checkbox"/> Has and uses materials | | |

Estimated Level of Support:

- Intermittent Limited Extensive Pervasive

Comments:

Recreation and Leisure Skills:

- | | | |
|--|---|---|
| <input type="checkbox"/> Aware of own interests | <input type="checkbox"/> Follows own safety rules | <input type="checkbox"/> Takes turns |
| <input type="checkbox"/> Accesses activities | <input type="checkbox"/> Chooses preferred activities | <input type="checkbox"/> Initiates activities |
| <input type="checkbox"/> Mastery of steps/directions for increased participation | | |

Estimated Level of Support:

Intermittent

Limited

Extensive

Pervasive

Comments:

Community Participation Skills:

Demonstrates travel skills
 Gets around school building

Participates in school drills
 Chooses socially appropriate activities

Follows safety rules
 Has knowledge to access community resources

Estimated Level of Support:

Intermittent

Limited

Extensive

Pervasive

Comments:

Work and Work-Related Skills

Accepts direction
 Works well with others
 Aware of support needs

Displays developing job skills
 Independent worker
 Follow schedule

Initiates tasks
 Completes tasks

Estimated Level of Support:

Intermittent

Limited

Extensive

Pervasive

Comments:

Additional Comments: