Ventura County SELPA FAMILY INTERVIEW WORKSHEET

Student:		Age:	Date:	IEP Date:
Interview Location:			Interviewer(s):	
Person(s) Interviewed:				
Language of Interview: ם English	Other () Translator	
		List		Name

SELF CARE, INDEPENDENT LIVING

Describe how student takes care of personal needs at home:

Eatin	g
Toilet	ting
Groo	ming
Dress	sing
Food	preparation
Hous	ehold Shopping
Hous	ehold and Outdoor Maintenance
Other	r
	would enable him/her to be more independent in self-care/independent living?
Are there ac	cademic needs in this area?
Are there so	ocial/emotional concerns in this area?
Are there co	ommunication issues in this area?

RECREATION, LEISURE ACTIVITIES

Describe leisure time activities he/she participates in at home:

What does he/she do during free time? (<i>i.e. watch TV, look at books, listen to music</i> .)
What skills would enable him/her to participate more in family activities? (<i>i.e. get out VCR tapes, turn on TV, look at TV, stand by door, etc.</i>)
Are there academic needs in this area?
Are there social/emotional concerns in this area?
Are there communication issues in this area?
VOCATIONAL
Describe the tasks/jobs he/she does at home:
What skills would enable him/her to be more independent in vocational activities?
(For students 14 and older) What kind of job/career has he/she expressed an interest in?
What skills would he/she need to have in order for this to be a reality?
Are there academic needs in this area?
Are there social/emotional concerns in this area?
Are there communication issues in this area?

COMMUNITY ACCESS, MOTOR SKILLS

Describe activities he/she participates in, in the community. (i.e. going to the movies, attending summer camp, going to the park, etc.)

What skills would enable him/her to be more independent in these activities?

Describe specific places that you take him/her in community (*i.e. grocery store, church, doctor/dentist, barber shop, crosses the street, visits relatives, etc.*):

What skills would enable him/her to be more independent in accessing these places?

COMMUNICATION

How does he/she communicate his/her needs to you?

How do you communicate to him/her?

What communication skills would enable him/her to be more independent?

SUMMARY QUESTIONS

- 1. What, in your opinion, is the most outstanding activity that your son/daughter is capable of?
- 2. What were the accomplishments of your child during this past year?
- 3. What frustrates you most concerning your child?
- 4. (If aged 15 or older) What are your son/daughter's and your family's dreams and goals after leaving public school, in these areas:

- Independent Living______
- Employment_____
- College or training program______

Does your son/daughter's Regional Center plan address any of the above items? If so, please specify:

<u>Отнек Issues</u> Specialized Healthcar	e:										
Mobility/Positioning:											
Behavior Plan:	Behavior Plan:										
Vision Impairment/Hea	aring Impairment:										
Other Agencies:	CCS/CMS	Regional Center									
	Mental Health	Social Services									
	Other	-									

What supports or services are the above agencies providing your son/daughter?

VENTURA COUNTY SELPA <u>FAMILY INTERVIEW</u> INITIAL SUMMARY WORKSHEET

•	st needed skills mentioned by family for increased independence and participation in each ea)
1.	Selfcare, Independent Living:
2.	Recreation, Leisure
3.	Vocational
4.	Community Access, Motor Skills
5.	Communication
6.	Social, Emotional
7.	Functional Academics

Circle the skills that are considered to be "*highest priority critical skills*". Use the **Critical Skills Ranking Worksheet**, if there are too many to work with, or if family has difficulty prioritizing according to need. Use the **VC SELPA Functional Skills Curriculum Framework** to develop goals and objectives to address the highest priority critical skills.

VENTURA COUNTY SELPA CRITICAL SKILLS RANKING WORKSHEET

(To be used to prioritize activities of most critical need)

Student

Date

List each activity from your Initial Summary Worksheet in the appropriate space below. Rate each question for each activity: 10 (*High*); 5 (*Medium*); 1 (*Low*).

Total the ratings for each activity. This will help you to see which activities would be most critical for the student to learn.

	Self Care, Independent Living						Recreation, Leisure								Vo	catio	nal					Commi ss, No				1	Comn	nunic	ation				Soc	ial, E	motic	onal	Functional Academic							ı		
The Activity		/			7		/	//	//	//	//	/		/	/	/	/	/	/	/	/	//	//	//	/	7	7	7	7	7	/	7	/		7	7	/	/	7	7	/	7	7	/	7	7
1. Is seen as a need by the majority of people interviewed: (<i>including the student</i>)																																														
2. Could be taught using age-appropriate materials and envrionments?																																														
3. Allows the care provider's life to be better or easier?																																														
4. Allows the student to become more independent?																																														
5. Will occur frequently in a variety of environments?																																														
6. Has a high probability of being used in future environments?																																														
7. Has a high probability of being acquired given the amount of insructional time and/or with appropriate adaptations?																																														
8. Increases interaction with people without disabilities?																																														
9. Increases participation in all environments?																																														
TOTAL																																														
RANK																																														