

# SYSTEMATIC OBSERVATION

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Observer: \_\_\_\_\_

Setting: \_\_\_\_\_

<u>Levels of Support in each area:</u>	
1. Pervasive 2. Extensive/Frequent 3. Limited 4. Intermittent	<b>Circle One</b>

<u>Check one:</u>
NO = Not Observed SO = Sometimes Observed FO = Frequently Observed

NO	SO	FO	<b>1. Cognition</b>
___	___	___	Retains concepts taught
___	___	___	Rate of learning is age/grade appropriate
___	___	___	Applies skills/concepts to new tasks
___	___	___	Other _____
Level of Support			1          2          3          4

**Comments:**

NO	SO	FO	<b>2. Daily and Independent Living</b>
___	___	___	Can make transitions
___	___	___	Has dressing skills
___	___	___	Personal care/hygiene
___	___	___	Preparation of materials
___	___	___	Uses materials safely/appropriately
___	___	___	Keeps schedules
___	___	___	Other _____
Level of Support			1          2          3          4

**Comments:**

NO	SO	FO	<b>3. Social and Interpersonal Skills</b>
___	___	___	Appropriate play skills
___	___	___	Appropriate peer interactions
___	___	___	Displays self-esteem
___	___	___	Follows directions
___	___	___	Initiates/responds to adults and peers
___	___	___	Shows social judgment
___	___	___	Other _____
Level of Support			1          2          3          4

**Comments:**

NO	SO	FO	<b>4. Communication Skills</b>
___	___	___	Initiates/responds
___	___	___	Follows directions
___	___	___	Gestures
___	___	___	Requests help
___	___	___	Expresses feelings
___	___	___	Symbolic language
___	___	___	Non-symbolic language
___	___	___	Other _____
Level of Support			1          2          3          4

**Comments:**

NO	SO	FO	<b>5. Academic Skills</b>	<b>Comments:</b>
___	___	___	Responds to teacher	
___	___	___	Shows ability to manage time	
___	___	___	Can use calendars/schedules	
___	___	___	Basic reading skills	
___	___	___	Uses basic writing skills	
___	___	___	Shows use of math skills	
___	___	___	Uses basic science knowledge	
___	___	___	Uses basic social studies knowledge	
___	___	___	Manages money/time	
___	___	___	Knows/uses survival words	
___	___	___	Other _____	
Level of Support			1      2      3      4	

NO	SO	FO	<b>6. Recreation and Leisure Skills</b>	<b>Comments:</b>
___	___	___	Choosing and initiating activities	
___	___	___	Shows turn-taking	
___	___	___	Follow safety guidelines	
___	___	___	Shows awareness of interests and skills	
___	___	___	Mastery of steps for participation	
___	___	___	Knows how to access community	
___	___	___	Other _____	
Level of Support			1      2      3      4	

NO	SO	FO	<b>7. Community Participation Skills</b>	<b>Comments:</b>
___	___	___	Knowledge of community resources	
___	___	___	Facilities and programs	
___	___	___	Travel skills to access resources	
___	___	___	Chooses socially appropriate activities	
___	___	___	Other _____	
Level of Support			1      2      3      4	

NO	SO	FO	<b>8. Work and Work-Related Skills</b>	<b>Comments:</b>
___	___	___	Shows completion of tasks	
___	___	___	Has awareness of schedules	
___	___	___	Willingness to accept direction	
___	___	___	Ability to work with others	
___	___	___	Demonstrates independent work habits	
___	___	___	Has knowledge of job options	
___	___	___	Involved in career exploration	
___	___	___	Other _____	
Level of Support			1      2      3      4	