WATI Student Information Guide
Referral/Question Identification Guide

Student's Name _____ Date of Birth _____ Age _____

School _____ Grade _____

School Contact Person _____ Phone _____

Person Completing Guide _____ Date _____

Parent(s) Name: _____ Phone _____

Address _____

Student's Primary Language _____ Family's Primary Language _____

Disability: (Check all that apply.)

☐ Speech/Language   ☐ Significant Developmental Delay   ☐ Specific Learning Disability
☐ Cognitive Disability   ☐ Other Health Impairment   ☐ Hearing Impairment
☐ Traumatic Brain Injury   ☐ Autism   ☐ Vision Impairment
☐ Emotional/Behavioral Disability   ☐ Orthopedic Impairment – Type:_____

Current Age Group: ☐ Birth to Three   ☐ Early Childhood
☐ Elementary   ☐ Middle School   ☐ Secondary

Classroom Setting: ☐ General Education   ☐ Resource Room
☐ Self-contained   ☐ Home   ☐ Other: _____

Current Service Providers:

☐ Occupational Therapy   ☐ Physical Therapy   ☐ Speech/Language
☐ Assistive Technology   ☐ Other(s): _____

Medical Considerations (Check all that apply)

☐ History of seizures   ☐ Fatigues easily
☐ Has degenerative medical condition   ☐ Has frequent pain
☐ Has multiple health problems   ☐ Has frequent upper respiratory infections
☐ Has frequent ear infections   ☐ Has digestive problems
☐ Has allergies to _____
☐ Currently taking medication for _____
☐ Other – Describe briefly _____
_____

Other Issues of Concern _____

Assistive Technology Current Used: (Check all that apply).

☐ None
☐ Manual Communication Board
☐ Low Tech Vision Aids
☐ Environmental Control Unit/EADL
☐ Manual Wheelchair
☐ Voice Recognition
☐ Adaptive Input – Describe _____
☐ Adaptive Output – Describe _____
☐ Other _____

☐ Low Tech Writing Aids
☐ Augmentative Communication System
☐ Amplification System
☐ Computer – Type (platform) _____
☐ Power Wheelchair
☐ Word Prediction

Assistive Technology Tried: Please describe any other assistive technology previously tried, length of trial, and outcome (how did it work or why didn't it work).

AT Tried	Length/dates of trail	Outcome

Has the WATI Consideration Guide been completed for this student? If so, please attach it.

REFERRAL QUESTION

What task(s) does the student need to do that is currently difficult or impossible, and for which assistive technology may be an option? _____
_____

Based on the referral question, select the sections of the Student Information Guide to be completed. (Check only those that apply).

☐ Section 1 Seating, Positioning and Mobility
☐ Section 2 Communication
☐ Section 3 Computer and Device Access
☐ Section 4 Motor Aspects of Writing
☐ Section 5 Composition of Written Material
☐ Section 6 Reading

☐ Section 7 Mathematics
☐ Section 8 Organization
☐ Section 9 Recreation and Leisure
☐ Section 10 Vision
☐ Section 11 Hearing
☐ Section 12 General

Now proceed to the Sections you checked and fill in the answers to the questions.

WATI Student Information Guide

SECTION 1
Seating, Positioning, and Mobility

1. **Description of Current Seating:** (Check all that apply.)

☐ Seating allows feed to be flat on floor.

☐ Chair seat is ½" from back of bent knee.

☐ Desk height is 1-2" higher than elbow when arm is bent at 90° angle.

☐ When used, top of desktop monitor is 2-3" below eye level.

☐ Seating provides adequate trunk stability.

☐ Seating facilitates readiness to perform task.

☐ There are questions or concerns about the student's seating. They are: _____

_____

2. **Student behavior when seated**: (Check all that apply).

☐ Student uses active learning position when appropriate.

☐ Student chooses alternative positions when given a chance (e.g., bean bag chair, standing, lying down).

☐ Student frequently falls out of chair.

☐ Student changes position with high frequency.

☐ Student gets in and out of seat more than expected.

☐ Student frequently slumps over desk.

☐ Student frequently props head up with hands.

☐ Student dislikes some positions, often indicates discomfort in the following positions: _____

_____

The discomfort is communicated by? _____

☐ The student has difficulty using table or desk – specific example: _____

_____

3. **Characteristics of current Seating and Positioning of Student** (Check all that apply.)

☐ Sits in regular chair.

☐ Sits in regular chair w/ pelvic belt or footrest.

☐ Sits in chair with non-slip surface.

☐ Sits in adapted chair – list brand or describe: _____

☐ Sits in seat with adaptive cushion that allows needed movement.

☐ Sits comfortably in wheelchair ☐ part of the day ☐ most of the day ☐ all of the day.

☐ Spends part of day out of chair due to prescribed positions.

☐ Spends part of day out of chair due to specific or general discomfort.

☐ Uses many positions throughout the day, based on activity.

☐ Has few opportunities for other positions.

☐ Uses regular desk/workstation.

☐ Uses desk with height adjusted.

☐ Uses tilted surface on which to work.

☐ Uses tray on wheelchair for desktop.

☐ Uses adapted table.

☐ Current seating interferes with the following activities: _____

_____

4. Student characteristics related to seating and positioning: (Check all that apply.)

☐ Student exhibits good positioning when: _____

☐ Student leans to the ☐ right ☐ left.

☐ Student holds head, arms, or other parts of the body a certain way, describe: _____

_____

☐ Student has specific positioning ☐ all day ☐ only at these times: _____

☐ Student expresses issues or concerns about seating/positioning.

☐ Student requires support positioning at the hips.

☐ Student has difficulty achieving and maintaining head control, best position for head control is: _____

_____

☐ Student can maintain head control for _____ minutes in _____ position.

Summary of Student's Abilities and Concerns Related to Seating and Positioning:

_____

_____

This section is for students with mobility issues. (Skip if student does not have mobility issues.)

1. Current mobility: (Check all that apply.)

☐ Crawls, rolls, or creeps independently   ☐ Is pushed in manual wheelchair

☐ Uses wheelchair for long distances only   ☐ Uses manual wheelchair independently

☐ Uses power chair   ☐ Needs help to transfer in and out of chair

☐ Transfers independently   ☐ Has difficulty walking

☐ Walks with assistance   ☐ Has difficulty walking up stairs

☐ Has difficulty walking down stairs   ☐ Needs extra time to reach destination

☐ Walks independently   ☐ Walks with appliance

☐ Uses elevator key independently   ☐ Other: _____

2. The student has the following skills, either emerging or mastered: (Check all that apply.)

☐ cause and effect   ☐ spatial relations   ☐ problem solving

☐ ability to interact with the environment   ☐ motivation/initiation

3. **Concerns about mobility. Student:** (Check all that apply.)

☐ Is extremely tired after walking   ☐ Requires a long time to recover

☐ Seems to be having more difficulty lately   ☐ Complains about pain or discomfort

☐ New schedule/location requires more time   ☐ Other: _____

4. **The student is unduly distracted by:** (Check all that apply.)

☐ Visual clutter   ☐ Fluorescent lighting vs. full-spectrum lighting

☐ Classroom and background noise   ☐ Tactile stimulation

☐ Awareness of physical space   ☐ Other: _____

5. **The student has issues with the following that may impact the use of power mobility:** (Check all that apply.)

☐ Behavior   ☐ Strength   ☐ Coordination   ☐ Vision

☐ Fatigue   ☐ Other physical abilities: _____

6. **The student's best access points other than the hand for operating a power mobility device is:**

☐ chin   ☐ head   ☐ foot   ☐ mouth   ☐ eyes   ☐ tongue

7. **The student can operate a power mobility device using:** (Check all that apply.)

☐ joystick   ☐ switch-adapted proportional joystick

☐ switch control (with and without proportional access)   ☐ sip and puff

☐ tongue-activated keypad   ☐ proximity switch   ☐ scanning with a switch

8. **The student needs to change in position in space in order to:** (Check all that apply.)

☐ reduce risk of pressure sores   ☐ restructure weight distribution

☐ increase sitting tolerance   ☐ other: _____

9. **The student needs to change position in the following ways:** (Check all that apply.)

☐ tilt   ☐ recline   ☐ elevate leg rests   ☐ elevate seat   ☐ stand

10. **The student needs assistance with**: (Check all that apply.)

☐ transfers   ☐ changing positions   ☐ accessing mobility device

11. **Student needs access to:** (Check all that apply.)

☐ AAC device   ☐ electronic aid to daily living (EADL) ☐ computer/mobile device

Summary of Student's Abilities and Concerns Related to Power Mobility:

_____

_____

WATI Student Information Guide
SECTION 2
Communication

1. **Student's Present Means of Communication**
   (Check all that are used. Circle the primary method the student uses).

☐ Changes in breathing patterns   ☐ Body position changes   ☐ Eye gaze/eye movement

☐ Facial Expressions   ☐ Gestures   ☐ Pointing

☐ Sign language approximations   ☐ Sign language (type: _____ # signs _____

       # combinations _____ # signs in a combination _____

☐ Vocalizations, list examples _____

☐ Vowels, vowel combinations, list examples _____

☐ Single words, list examples & approx. # _____

☐ 2-word utterances   ☐ 3-word utterances

☐ Semi-intelligible speech, estimate % intelligible with familiar partner: _____ with unfamiliar partner: _____

    in familiar context: _____ in unknown context _____.

☐ Communication board   ☐ Tangibles   ☐ Photos   ☐ Symbols   ☐ Visual Scenes

☐ Combination symbols/words   ☐ Words

☐ 2 symbol combinations – list examples _____

☐ 3 or more symbol combinations – list examples _____

☐ Communication book/binder – number of pages in book/binder _____

    Does student navigate to desired page/message independently? ☐ yes ☐ no

☐ Schedule board(s) – list examples _____

☐ Speech Generating device(s) – please list _____

☐ Multiple overlays or levels – list examples _____

☐ Partner Assisted Scanning – please describe strategies and communication system _____

_____

☐ Intelligible speech   ☐ Writing   ☐ Other _____

Comments about student's present means of communicating: _____

_____

2. **Purposes of Communication:** (List examples after each one checked.)

☐ Greeting _____

☐ Requesting _____

☐ Demanding _____

☐ Interacting socially _____

☐ Social etiquette _____

☐ Denials/rejections _____

☐ Shared information, including joint attention _____

3. Those Who Understand Student's Communication Attempts (Check best descriptor).

	Most of the time	Part of the time	Rarely	Not Applicable
Strangers	☐	☐	☐	☐
Teachers/therapists	☐	☐	☐	☐
Peers	☐	☐	☐	☐
Siblings	☐	☐	☐	☐
Parent/Guardian	☐	☐	☐	☐

4. Current Level of Receptive Language

Age approximation: _____

If formal tests used, name and scores: _____

If formal testing is not used, please give an approximate age or developmental level of functioning. Explain your rationale for this estimate: _____

_____

5. Current Level of Expressive Language

Age approximation: _____

If formal tests used, name and scores: _____

If formal testing is not used, please give an approximate age or developmental level of functioning. Explain your rationale for this estimate. _____

How many symbols/signs/words does the student use regularly without a model/prompt? _____

Does the student combine symbols/signs/words without a prompt?   Yes   No

6. Communication Interaction Skills

Desires to communicate ☐ Yes ☐ No

To indicate *yes* and *no* the student:

☐ Shakes head   ☐ Signs   ☐ Vocalizes   ☐ Gestures   ☐ Eye gazes

☐ Points to board   ☐ Uses word approximations   ☐ Does not respond consistently

☐ Can a person unfamiliar with the student understand the response? ☐ Yes ☐ No

(Continued on next page)

WATI Development Team. (2017). Assistive Technology Consideration and Assessment forms.

7. Does the student: (check best descriptor)

	Always	Frequently	Sometimes	Seldom	Never
Turn toward speaker?	☐	☐	☐	☐	☐
Get other's attention?	☐	☐	☐	☐	☐
Interact with peers?	☐	☐	☐	☐	☐
Show awareness of listener's attention?	☐	☐	☐	☐	☐
Initiate interactions?	☐	☐	☐	☐	☐
Ask questions?	☐	☐	☐	☐	☐
Respond to communication interaction?	☐	☐	☐	☐	☐
Ask for clarification from communication partner?	☐	☐	☐	☐	☐
Repair communication breakdowns?	☐	☐	☐	☐	☐
Change language according to needs of listener?	☐	☐	☐	☐	☐
Take turns with communication partner?	☐	☐	☐	☐	☐
Require verbal prompts?	☐	☐	☐	☐	☐
Require physical prompts?	☐	☐	☐	☐	☐
Maintain communication exchange?	☐	☐	☐	☐	☐
Terminate communication?	☐	☐	☐	☐	☐

Describe techniques student uses for repair (e.g., keeps trying, changes message, points to first letter, etc.)

_____

_____

8. Student's Needs Related to Device/Systems (Check all that apply).

☐ Walks   ☐ Uses wheelchair   ☐ Carries device under 2 pounds

☐ Drops or throws things frequently   ☐ Needs digitized (human) speech

☐ Needs device w/large number of words and phrases

☐ Requires scanning

☐ Requires auditory preview

☐ One reliable switch site   ☐ More than one reliable switch site

☐ Other: _____

9. Pre-Reading and Reading Skills Related to Communication (Check all that apply).

☐ Yes ☐ No   Object/picture recognition

☐ Yes ☐ No   Symbol recognition (tactile, Mayer-Johnson, Rebus, etc.) Number of symbols _____

☐ Yes ☐ No   Auditory discrimination of sounds

☐ Yes ☐ No   Auditory discrimination of words, phrases

☐ Yes ☐ No   Selects initial letter of word

☐ Yes ☐ No   Follows simple directions

☐ Yes ☐ No   Sight word recognition   Number of words _____

☐ Yes ☐ No   Recognizes environmental print

☐ Yes ☐ No   Puts two symbols or words together to express an idea

List any other reading or pre-reading skills that support communication _____

_____

10. Visual Abilities Related to Communication (Check all that apply).

☐ Maintains fixation on stationary object   ☐ Looks to right and left without moving head

☐ Visually recognizes people   ☐ Scans matrix of symbols in a grid

☐ Visually recognizes common objects   ☐ Scans line of symbols left to right

☐ Visually recognizes photographs   ☐ Visually shifts horizontally

☐ Visually recognizes symbols or pictures   ☐ Visually shifts vertically

☐ Needs additional space around symbol   ☐ Looks at communication partner

☐ Requires high contrast symbols or borders   ☐ Benefits from "zoom" feature

Is a specific type (brand) of symbols or pictures preferred? _____

What size symbols or pictures are preferred? _____

What line thickness of symbols is preferred? _____ inches

Does student seem to do better with black on white, white on black, or a specific color combination for figure/ground discrimination? _____

From what size field can the student make appropriate selections? _____

Explain anything else you think is significant about the communication system the student currently uses for his/her needs: (Use additional page if necessary) _____

_____

_____

_____

_____

_____

11. Sensory Considerations:

Does the student have sensitivity to:

       ☐ Velcro

       ☐ Synthesized (computer generated) voices

       ☐ Volume

       ☐ Switch feedback (clicking noise)

       ☐ Tactile sensations

       ☐ Other

Explain student's reaction to any of the checked items _____

_____

_____

12. What are the communication expectations for the student in different environments?

School (regular and special ed., with peers, formal and informal – such as lunchroom settings)

_____
_____
_____
_____
_____
_____

Home _____

_____
_____

Community (stores, restaurants, church, library, etc.) _____

_____
_____

Summary of Student's Abilities and Concerns Related to Communication including past AT used to support student's communication _____

_____
_____
_____
_____
_____

WATI Student Information Guide
SECTION 3
Computer and Device Access

1. Computer and Device Use

List current computer and device use: _____

_____

What AT has been tried previously? _____

_____

What difficulty is the student having with current method of access? _____

_____

2. Current Computer Access – How does the student currently access the computer?

☐ Doesn't access the computer   ☐ Adapted keyboard/mouse: _____

☐ Regular keyboard/mouse/touchpad   ☐ Specialized Software: _____

☐ Touch type with two hands   ☐ Head: _____

☐ Hunt/peck with one hand   ☐ Speech recognition: _____

☐ Touch type with one hand   ☐ Switch scanning: _____

☐ Hunt/peck with one hand   ☐ Touchscreen: _____

☐ Eye gaze   ☐ Other: _____

3. Current Device Access – type of device _____

How does the student currently access the device?

☐ Doesn't access a device   ☐ Uses assistive touch features to access

☐ 2 hand touch and hardware buttons   ☐ Speech recognition

☐ 1 hand touch and hardware buttons   ☐ Single switch access

☐ Single finger touch gestures   ☐ Multi switch access

☐ Multi finger touch gestures   ☐ Adapted keyboard: _____

☐ Head pointer access   ☐ Eye gaze

☐ Other _____

4. Physical Abilities

Does the student have limitations to range of motion? ☐ Yes ☐ No

Does student have abnormal reflexes or abnormal muscle tone? ☐ Yes ☐ No

If abnormal, is it high or low? ☐ high ☐ low

Does student have difficulty with accuracy? ☐ Yes ☐ No

Does student fatigue easily: During activities? ☐ Yes ☐ No Throughout the day? ☐ Yes ☐ No

Describe how physical abilities affect computer use. _____

_____

_____

_____

Is the student's speech clear? ☐ Yes ☐ No Is the student's speech consistent? ☐ Yes ☐ No

Has scanning been tried? ☐ Yes ☐ No If yes, did it work? _____

_____

5. Motor Control

Does the student have voluntary, controlled movement of the following? (Check all that apply)

☐ Right hand	☐ Right arm	☐ Right leg	☐ Right foot
☐ Left hand	☐ Left arm	☐ Left leg	☐ Left foot
☐ Head	☐ Eyes	☐ Mouth	☐ Voice
☐ Fingers	☐ Other: _____		

What is the student's most consistent voluntary movement?

6. Positioning

How is the student positioned for computer or device access?

☐ Regular classroom chair ☐ Regular chair with adaptations: _____

☐ Specialty chair: _____

☐ Wheelchair: _____

☐ Other: _____

7. Sensory

Does the student have any issues with hearing? ☐ Yes ☐ No

Does the student have any issues with vision? ☐ Yes ☐ No

Describe how sensory issues/abilities affect computer use. _____

_____

_____

_____

8. Literacy - At grade level is the student currently performing in:

Reading? _____ Spelling? _____ Writing? _____

At what grade level are the student's:

Math skills? _____ Computer skills? _____

9. Summary of Students Abilities and Concerns Related to Computer and Device Access

_____

_____

_____

_____

WATI Student Information Guide

SECTION 4
Motor Aspects of Writing

1. Current Writing Ability (Check all that apply).

☐ Scribbles

☐ Prints name

☐ Holds pencil, but does not write

☐ Writes on 1" lines

☐ Writes independently and legibly

☐ Uses space correctly

☐ Sizes writing to fit spaces

☐ Writes cursive

☐ Writes on narrow lines

☐ Can read work he has written

☐ Pretend writes

☐ Scribbles with a few recognizable letters

☐ Prints a few words

☐ Copies from book (near point)

☐ Copies from board (far point)

☐ Copies simple shapes

☐ Writing is limited due to fatigue

☐ Writing is slow and arduous

☐ Can maintain place on paper

☐ Can fit answers in allotted space

2. Current Writing Needs (Check all that apply).

☐ Single words   ☐ Short phrases   ☐ Sentences   ☐ Paragraphs   ☐ Essays/papers

☐ Fill in blanks   ☐ Take notes   ☐ Other: _____

3. Current Keyboarding Ability (Check all that apply).

☐ 10-finger typing (functional speed)

☐ Multi-finger typing (functional or slow)

☐ One-finger typing (functional or slow)

☐ Does not currently type

☐ Activates desired key on command

☐ Accidentally hits unwanted keys

☐ Requires arm or wrist support to type

☐ Uses alternate keyboard: _____

☐ Uses access software: _____

☐ Uses touch window

☐ Uses head or mouth stick

☐ Uses switch to access computer

☐ Uses scanning to access computer

☐ Other _____

4. Computer Use (Check all that apply).

☐ Has never used a computer

☐ Uses a computer: ☐ rarely   ☐ occasionally   ☐ frequently   ☐ daily

☐ Uses a computer at: ☐ home   ☐ school

☐ Uses computer for: ☐ word processing   ☐ internet   ☐ spell checking

☐ Uses computer for the following subjects or tasks: _____

_____

☐ Student has potential to use computer but has not for the following reason: _____

_____

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5. Assistive Technology Currently Used (Check all that apply).

☐ Adapted pencils-pencil grips

☐ Adapted papers

☐ Writing templates

☐ Adapted/portable keyboards

☐ Computers with accessibility features

☐ Adaptive Software: text-to-speech; word prediction; voice recognition _____

☐ Scanned worksheets

☐ Other _____

6. Computer Availability

The student has access to the following computer(s):

☐ PC   ☐ Macintosh   ☐ Chromebook   ☐ Tablet   ☐ Other _____

☐ Desktop   ☐ Laptop

Location: _____

Summary of Student's Abilities and Concerns Related to Writing _____

_____

_____

_____

_____

WATI Student Information Guide

SECTION 5
Composition of Written Material

1. Typical of Student's Present Writing (Check all that apply).

☐ Words, but not identifiable   ☐ Writes with symbols   ☐ Short words

☐ Short phrases   ☐ Complex phrases   ☐ Sentences

☐ Short paragraph 2-5 sentences   ☐ Longer paragraphs   ☐ Multi paragraphs

2. Difficulties Currently Expressed by the Student (Check all that apply).

☐ Understanding that words have meaning   ☐ Answering questions beyond yes/no

☐ Finding facts   ☐ Understanding that sentences require parts (nouns and verbs)

☐ Getting started with a sentence starter   ☐ Adding information to a topic

☐ Sequencing information   ☐ Integrating information from 2 or more sources

☐ Relating information to a topic   ☐ Determining when to begin a paragraph

☐ Generating ideas with or without a graphic organizer   ☐ Working with peers to write

☐ Planning content   ☐ Using academic vocabulary   ☐ Using transitional words

☐ Using basic core words   ☐ Summarizing writing for different audiences

☐ Other: _____

3. Strategies for Composing Written Materials Student Currently Utilizes (Check all that apply).

☐ Sentence starters   ☐ Picture cues   ☐ Story starter

☐ Transitional words (first, next)   ☐ Preset choices or plot twist

☐ Webbing or concept mapping   ☐ with pictures   ☐ without pictures

☐ Templates to provide the format or structure (both paper and electronic)

☐ Outlines   ☐ Other: _____

4. Aids/Assistive Technology for Composing Written Materials Utilized by Student (Check all that apply).

☐ Picture cards   ☐ Color cues for grammar   ☐ Writing with symbols

☐ Word cards   ☐ Word wall list

☐ Prewritten words on cards or labels   ☐ Spell check/Dictionary/Thesaurus

☐ Whole word apps or software   ☐ Word prediction   ☐ Scanning Pen

☐ Voice to text on phone or other device

Summary of Student's Abilities and Concerns Related to Composing Written Material

_____
_____
_____
_____

WATI Student Information Guide

SECTION 6
Reading

1. The Student Demonstrates the Following (Check all that apply. Add comments to clarify).

☐ Engages in joint attention with adult caregiver to activities (e.g. songs, stories, games and/or toys)

☐ Shows an interest in books and stories with an adult

☐ Shows an interest in looking at books independently

☐ Associates pictures with spoken words when being read to

☐ Realizes text conveys meaning when being read to

☐ Recognizes connection between spoken words and specific text when being read to

☐ Pretend writes and "reads" what he or she has written, even if scribbles

☐ Recognizes and reads environmental print

☐ When asked to spell a word, gets first consonant correct, but not the rest of the word

☐ Demonstrates sound manipulation skills including:

☐ Initial and final sounds in words   ☐ Initial letter names/sounds

☐ Recognizes, names, and prints the alphabet (if motor skills are limited, may use alternative means rather than printing to demonstrate knowledge of the alphabet)

☐ When asked to spell a word, gets first and last sounds correct

☐ Demonstrates sound-symbol relationship

☐ Isolates individual phonemes: consonants, vowels, blends, digraphs (i.e., initial, final, medial)

☐ Applies phonics rules when attempting to decode printed words

☐ Remembers/recognizes visual patterns made by words or letter combinations (e.g., "-ing")

☐ Demonstrates phonemic awareness to identify similar and dissimilar patterns in words

☐ Sound blends words

☐ Reads and understands words in context

☐ Recognizes familiar words in different contexts

☐ Remembers previously taught words

☐ Uses specific reading strategies: _____

☐ Uses inventive spelling most of the time

☐ Uses conventional spelling most of the time

☐ Reads and understands sentences

☐ Composes sentences using nouns and verbs

☐ Reads fluently with expression

☐ Reads and understands paragraphs

☐ Composes meaningful paragraphs and using correct syntax and punctuation

2. Difficulties Experienced by Student (Check all that apply. Add comments for clarification).

Student has difficulty physically accessing (e.g., positioning, opening, turning pages):

☐ Single sheets of paper ☐ Books ☐ Magazines ☐ Multi-page worksheets

Student has difficulty understanding language based on:

☐ English Language Learner ☐ Limited Background experiences

Student has sensory difficulties with:

☐ Visual clutter ☐ Fluorescent lighting ☐ Background noise

☐ Tactile sensitivity ☐ Personal space ☐ Other: _____

Student experiences difficulties with:

☐ Auditory processing ☐ Short term memory ☐ Working memory

Student experiences ☐ general fatigue ☐ visual fatigue

Student has difficulty decoding:

☐ Worksheets ☐ Content textbooks ☐ Trade books ☐ Tests

☐ Websites or other digital text

☐ Modified curriculum, describe: _____

☐ Recreational text

Student has difficulty comprehending:

☐ Worksheets ☐ Content textbooks ☐ Trade books ☐ Tests

☐ Websites or other digital text

☐ Modified curriculum, describe: _____

☐ Recreational text

3. Student's Performance is Improved by (Check all that apply).

☐ Smaller amount of text on page ☐ Enlarged print

☐ Word wall to refer to ☐ Pre-teaching concepts

☐ Graphics/pictures to communicate ideas ☐ Text rewritten at lower reading level

☐ Bold type for main ideas ☐ Reduced length of assignment

☐ Additional time ☐ Being placed where there are few distractions

☐ Visual cues and schedule ☐ Frequent movement breaks

☐ Spoken text to accompany print ☐ Color overlay or colored text/background

☐ Increased spacing between words/lines (List color _____)

☐ Symbol or Rebus supports to text ☐ Other _____

4. Reading Assistance Used

Please describe the non-technology based strategies and accommodations that have been used with this student

_____

_____

5. Assistive Technology Used

The following have been tried. (Check all that apply. Add comments for clarification).

☐ Highlighter, marker, template, or other self-help aid in visual tracking

☐ Changed background color to change contrast between text and background

WATI Development Team. (2017). Assistive Technology Consideration and Assessment forms.

☐ Human voice via recorded text, or talking books to "read along" with text

☐ Digital audio files (.mp3, iPod, etc.)

☐ Talking dictionary or talking spell checker to pronounce single words

☐ Handheld pen scanner to read difficult words or phrases

☐ Electronic text from

☐ internet   ☐ publisher   ☐ scanned text   ☐ other _____

☐ Computer/device with text-to-speech software to speak:

☐ single words   ☐ sentences   ☐ paragraphs   ☐ entire document

☐ Handheld device to read electronic books

☐ Electronic books from Bookshare or other digital source

Explain what seemed to work or not work with any of the above assistive technology that has been tried.

_____
_____
_____

6. Student Sills:

Approximate age or grade level of reading skills: _____

Cognitive ability in general:

☐ Significantly below average   ☐ Below average   ☐ Average   ☐ Above average

7. Computer/Device Use:

Student has access to: ☐ PC   ☐ Macintosh   ☐ Chromebook   ☐ Tablet

Student uses a computer/device: ☐ Rarely   ☐ Frequently

          ☐ Daily for one or more subjects/periods   ☐ Every day, most of the day

For the following purposes: _____

Student is able to manipulate electronic text using: ☐ trackpad ☐ mouse ☐ swipe left/right

Other: _____

Summary of Student's Abilities and Concerns Related to Reading

_____
_____
_____
_____

WATI Student Information Guide

SECTION 7
Mathematics

1. Student is Able to: (Check all that apply).

Read Math

☐ Recognize numerals   ☐ Recognize math signs

☐ Understand math related language and vocabulary

☐ Gain meaning from numbers, shapes, and other representational formats

☐ Recognize three-dimensional object from multiple angles

☐ Interpret visual representation (e.g., charts, graphs, grids)

☐ Switch from one representational format to another (e.g complex numbers vs. fractions)

☐ Read/understand equations   ☐ Other: _____

Understand Math Concepts

☐ Counting   ☐ One-to-one correspondence

☐ Basic math facts   ☐ Money

☐ Time   ☐ Units of measurement (e.g., size, distance, volume)

☐ Precents/decimals   ☐ Points on graphs

☐ Arrange objects in groups according to size, color, shape, etc.

☐ Other: _____

Solve Math Problems

☐ Choose correct math operation

☐ Complete operational steps include: ☐ simple addition

     ☐ simple subtraction   ☐ complex addition   ☐ complex subraction

     ☐ multiplication   ☐ division

☐ Apply action steps from/to a story problem

☐ Organize and apply multiple steps to solve problems

☐ Convert mixed numbers/fractions

☐ Apply functions and formulas

☐ Other: _____

Write and Represent Math

☐ Write legible numbers   ☐ Align numbers vertically

☐ Draw math figures   ☐ Organize work on a page

☐ Understand and use place value   ☐ Align steps of a problem

☐ Represent concepts in alternate formats (e.g., graphs, charts, or geometric shapes)

☐ Write simple math equations   ☐ Write complex math equations

☐ Fill in numbers/data in graphs   ☐ Other: _____

2. Problems Student Experiences (Check all that apply)

☐ Visual-spatial processing

☐ Fatigue

☐ Low working memory

☐ Explaining math thinking either verbally or in writing

☐ Using language of math to express ideas

☐ Testing conclusions by asking appropriate questions

☐ Other: _____

3. Assistive Technology Tried (check all that apply).

☐ Adapted manipulatives

☐ Adapted stamp (e.g., numbers, shapes)

☐ Adapted watch/clock

☐ Adapted measuring devices

☐ Adapted paper

☐ Enlarged paper

☐ Graph paper

☐ Onscreen keyboards or calculators

☐ Virtual manipulatives

☐ Voice recognition for math notation

☐ Other: _____

☐ Alternate calculator

    ☐ Large print

    ☐ Talking

    ☐ Graphing

☐ Math graphic organizer

☐ Math specific writing, drawing software

☐ Digital math toolbars for writing equations

☐ Math software to help visualize, script visual math concepts

4. Strategies Used

Please describe any strategies that had been used to help.

_____
_____
_____
_____

Summary of Student's Abilities and Concerns Related to Math

_____
_____
_____
_____

WATI Student Information Guide

SECTION 8
Organization

1. Difficulties Student has with Organization (Check all that apply).

Self management

☐ Unable to self-regulate behavior and attention

☐ Easily distracted

Time management

☐ Arrives late

☐ Misses deadlines

☐ Poor transitions between activities

☐ Struggles to settle down after transitions or when it is work time

Materials management

☐ Messy work and storage areas

☐ Lost papers and projects

☐ Can't find work tools such as book, scissors, or markers quickly

Information Management

☐ Breaking a large project into smaller steps

☐ Organizing notes or review items

☐ Completing multi-step tasks

2. Assistive Technology (Check all that apply).

Self

☐ Fidgets

☐ Sitting on a therapy ball, bounce, or stiz cushions

☐ Pressure or weighted vest

☐ Concentration CD's or MP3's

Information

☐ Folders

☐ Tabs/Post Its

☐ Highlighters

☐ Study guides

☐ Handheld recorders

☐ Digital organizers

☐ Search tools/engines

☐ Bookmarking tools

☐ Graphic organizers

☐ Manipulatives/Instructional Tutorials

☐ Animations

Materials

☐ Folders/containers/bins/boxes

☐ Checklists

☐ Coding

☐ Filing

☐ Portable electronic storage

☐ Computer based electronic storage

Time

☐ Clock analog vs. digital

☐ Adapted clocks and watches

    ☐ Talking readout

    ☐ Large numbers

    ☐ Visual cue

    ☐ Timed reminder message

Schedules

    ☐ **Picture**

    ☐ Worded

    ☐ Calendar-based

☐ Digital scheduler

☐ Digital reminder

3. Summary of Student's Abilities and Concerns Related to Organization

_____

_____

_____

_____

_____

_____

_____

WATI Student Information Guide
SECTION 9
Recreation and Leisure

1. Difficulties Student Experiences Participating in Recreation and Leisure (Check all that apply.)

Understanding cause and effect   Following complex directions

Understanding turn taking   Communicating with others

Handing/manipulating objects   Hearing others

Throwing/catching objects   Seeing equipment or materials

Understanding rules   Operating TV, VCR, etc.

Waiting for his/her turn   Operating computer

Following simple directions   Other _____

2. Activities Student Especially Enjoys _____

_____

_____

_____

3. Adaptations Tried to Enhance Participation in Recreation and Leisure _____

_____

_____

How did they help? _____

_____

_____

4. Assistive Technology Tried (Check all that apply.)

Toys adapted with Velcro®, magnets, handles etc.

Toys adapted for single switch operation

Adaptive sporting equipment, such as lighted or beeping ball

Universal cuff or strap to hold crayons, markers, etc.

Modified utensils, e.g. rubber stamps, rollers, brushes

Ergo Rest or other arm support

Electronic aids to control/operate TV, VCR, CD player, etc.

Software to complete art activities   Games on the computer

Other computer software   Other _____

Summary of Student's Abilities and Concerns in the Area of Recreation and Leisure

_____

_____

WATI Student Information Guide
SECTION 10
Vision

A vision specialist should be consulted to complete this section.

1. Date of Last Vision Report ⎯⎯⎯⎯⎯⎯⎯

Report indicates (please address any field loss, vision condition, etc.) ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

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2. Visual Abilities (Check all that apply.)

☐ Read standard textbook print

☐ Read text if enlarged to (indicate size in inches) ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Requires specialized lighting such as ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Requires materials tilted at a certain angle (indicate angle) ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Can read using optical aids; list: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Currently uses the following screen enlargement device ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Currently uses the following screen enlargement software ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Recognizes letters enlarged to ⎯ pt. type on computer screen

☐ Recognizes letters enlarged to ⎯ pt. type for ⎯⎯ minutes without eye fatigue.

☐ Prefers ☐ Black letters on white ☐ White on black ☐ ⎯⎯⎯⎯(color) on ⎯⎯⎯⎯

☐ Tilts head when reading

☐ Uses only one eye: ☐ Right eye ☐ Left eye

☐ Uses screen reader: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

☐ Requires recorded material, text to speech, or Braille materials

3. Alternative Output

Currently uses (Check all that apply.)

☐ Slate and stylus

☐ Talking calculator

☐ Braille calculator

☐ Braille notetaker

☐ Electric Brailler

☐ Refreshable Braille display

☐ Tactile images

☐ Screen reader

☐ Braille translation software: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

Level of proficiency (Check the one that most closely describes the student.)

☐ Requires frequent physical prompts   ☐ Requires frequent verbal cues

☐ Needs only intermittent cues   ☐ Uses device to complete tasks independently

☐ Trouble-shoots problems related to device

4. Writing/Handwritten Materials (check all that apply)

☐ Writes using space correctly   ☐ Writes on line

☐ Writes appropriate size   ☐ Reads own handwriting

☐ Reads someone else's writing   ☐ Reads hand printing

☐ Reads cursive   ☐ Skips letters when copying

☐ Requires bold or raised-line paper   ☐ Requires softer lead pencils

☐ Requires colored pencils, pens, or paper   ☐ Requires felt tip pen   ☐ Thin point ☐ Thick point

Summary of Student's Abilities and Concerns Related to Vision _____

_____

_____

_____

_____

WATI Student Information Guide
SECTION 11
Hearing

A hearing specialist should be consulted to complete this section.

1. Audiological Information

Date of last audiological exam _____

Hearing loss identified

Right Ear	☐	Mild	☐	Moderate	☐ Severe	☐	Profound
Left Ear	☐	Mild	☐	Moderate	☐ Severe	☐	Profound

Onset of hearing loss _____ Etiology _____

2. Unaided Auditory Abilities (Check all that apply.)

☐ Attends to sounds   ☐ High pitch ☐ Low pitch ☐ Voices ☐ Background noises
☐ Discriminates environmental vs. non-environmental sounds
☐ Turns toward sound
☐ Hears some speech sounds
☐ Understands synthesized speech

3. Student's Eye Contact and Attention to Communication (Check best descriptor.)

☐ Poor   ☐ Inconsistent   ☐ Limited   ☐ Good   ☐ Excellent

4. Communication Used by Others
Indicate the form of communication generally used by others in each of the following environments.
(Check all that apply.)

	School	Home	Community
☐ Body language	☐	☐	☐
☐ Tangible symbols	☐	☐	☐
☐ Gestures	☐	☐	☐
☐ Speech	☐	☐	☐
☐ Cued speech	☐	☐	☐
☐ Picture cues	☐	☐	☐
☐ Written messages	☐	☐	☐
☐ Signs and speech together	☐	☐	☐
☐ Signed English	☐	☐	☐
☐ Contact (Pidgin) sign language	☐	☐	☐
☐ American Sign Language (ASL)	☐	☐	☐

5. Level of Receptive Proficiency in Each Environment

	School	Home	Community
☐ Understands single words	☐	☐	☐
☐ Understands short phrases	☐	☐	☐
☐ Understands majority of communications	☐	☐	☐

6. Student Communicates with Others Using (Check all that apply)

☐ Speech   ☐ American Sign Language   ☐ Body language

☐ Signs and speech together   ☐ Gestures   ☐ Written messages

☐ Signed English   ☐ Picture cues   ☐ Contact (Pidgin) sign language

☐ Other _____

Level of expressive communication:

☐ Single words   ☐ Combination of words   ☐ Proficient

7. Is There a Discrepancy Between Receptive and Expressive Abilities?

☐ Yes   ☐ No

If yes, describe further. _____

_____

8. Services Currently Used (Check all that apply)

☐ Audiology _____   ☐ Note taker

Educational interpreter using: ☐ ASL   ☐ Transliterating ☐ PSE ☐ Oral

9. Equipment Currently Used (Check all that apply.)

☐ Hearing aids   ☐ Cochlear implant   ☐ Telecaption decoder

☐ Vibrotactile devices   ☐ Classroom amplification system   ☐ TTY/TDD

☐ FM system   ☐ Other _____

10. Present Concerns for Communication, Writing, and/or Educational Materials

☐ Cannot hear teacher/other students   ☐ Cannot respond to emergency alarm

☐ Cannot participate in class discussions   ☐ Cannot benefit from educational videos/programs

☐ Displays rec./exp. language delays   ☐ Cannot use telephone to communicate

11. Current communication functioning (Check all that apply)

☐ Desires to communicate

☐ Initiates interaction

☐ Responds to communication requests

☐ Reads lips

☐ Appears frustrated with current communication functioning

☐ Requests clarification from communication partners ("Would you please repeat that?")

☐ Repairs communication breakdown (Keeps trying, changes message)

12. Current Reading Level _____

Summary of Hearing Abilities and Concerns _____

_____

_____

WATI Student Information Guide
Section 12
General

Are there any behaviors (both positive and negative) that significantly impact the student's performance?

_____

_____

_____

_____

_____

_____

Are there significant factors about the student's strengths, learning style, coping strategies or interests that the team should consider?

_____

_____

_____

_____

_____

_____

Are there any other significant factors about the student that the team should consider?

_____

_____

_____

_____

Does student fatigue easily or experience a change in performance at different times of the day?

_____

_____

_____

_____