

CONSUMER ASSESSMENT FORM

Consumer _____ Staff Member _____ Date: _____

Directions: Indicate the response for each item in the appropriate category based on information gathered from the consumer, parents and other family members, friends, staff and observations during the situational assessment. For each item, describe the behavior, characteristic or activity. When applicable, include the frequency of its occurrence, the environment where it occurs (antecedent, consequences, location, people), and other comments. In recording information, it should be based on what is the norm for that environment. For example, behavior that may be fine for a landscaping job may not be okay for an office job and vice versa.

	Consumer Input	Parent, Family, Friend Input	Staff Input Residential & Other	Situational Assessment I	Situational Assessment II	Situational Assessment III
				Date: _____ Site: _____ Hour Begun: _____ Hour Ended: _____	Date: _____ Site: _____ Hour Begun: _____ Hour Ended: _____	Date: _____ Site: _____ Hour Begun: _____ Hour Ended: _____
Strength: lifting & carrying • Strong (+ 50 lbs.) • Average (30 to 40 lbs.) • Fair (10-20 lbs.) • Poor (Less than 10 lbs.)						
Endurance • Work more than 4 hours • Work 3 to 4 hours • Work 2 to 3 hours • Work less than 2 hours • Needs frequent breaks						
Orienting • Building and grounds • Building wide • Several rooms • Small area only						

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	Consumer Input	Parent, Family, Friend Input	Staff Input Residential & Other	Situational Assessment I	Situational Assessment II	Situational Assessment III
Independent Work Rate (Without prompts) <ul style="list-style-type: none"> • Continual fast pace • Above average/sometimes fast • Steady/average pace • Slow pace 						
Appearance <ul style="list-style-type: none"> • Neat/clean and clothing matched -appropriate for environment • Neat/clean but clothing unmatched • Unkempt/clean • Unkempt/poor hygiene 						
Communication <ul style="list-style-type: none"> • Communicates clearly, intelligible to strangers • Speaks unclearly • Uses sounds/gestures • Unable to communicate verbally 						
Social Interaction <ul style="list-style-type: none"> • Initiates conversation • Comfortable making verbal requests of others • Responds appropriately • Speaks in an acceptable tone of voice • Quiet & reserved • Outgoing, but appropriate • Stays focused on topic • Polite and courteous • Speaks about appropriate topics • Interacts appropriately during conversation • Talks excessively • Inappropriately outgoing • Speaks about inappropriate topics 						

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Attention to Task/Perseverance <ul style="list-style-type: none"> • Independently stays focused on tasks • Infrequent prompts/low supervision • Frequent prompts/moderate supervision • Requires constant prompts/high level of supervision 						
Independent Sequencing of Job Duties <ul style="list-style-type: none"> • Performs 7 or more tasks in sequence • Performs 4 to 6 tasks in sequence • Performs 2 to 3 tasks in sequence • Cannot perform more than 1 task at a time 						
Initiative/Motivation <ul style="list-style-type: none"> • Always seeks work • Sometimes volunteers • Waits for directions • Avoids next task 						
Adapting to Change <ul style="list-style-type: none"> • Adapts to change readily • Adapts to change with some difficulty • Adapts to change with great difficulty • Rigid routine required 						
Reinforcement Needs <ul style="list-style-type: none"> • Paycheck sufficient • Needs other reinforcement weekly • Daily • Several times per day 						

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Attitude About Working <ul style="list-style-type: none"> • Very supportive of work • Supportive of work with reservations • Indifferent about work • Negative about work 						
Discrimination Skills <ul style="list-style-type: none"> • Distinguishes between work supplies • Distinguishes between work supplies with external cue • Cannot distinguish between work supplies 						
Time Awareness <ul style="list-style-type: none"> • Can tell time in hours/minutes • Can tell time to the hour • Identifies breaks/lunch, end of day • Unaware of time and clock function 						
Functional Reading <ul style="list-style-type: none"> • Fluent reading • Simple reading • Sight words/symbols • None 						
Functional Math <ul style="list-style-type: none"> • Computational skills • Simple addition/subtraction • Simple counting • None 						

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Handling Feedback <ul style="list-style-type: none"> • Responds positively to feedback • Somewhat resistant but responds appropriately • Withdraws into silence • Resistive/argumentative with feedback 						
Taking Directions <ul style="list-style-type: none"> • Takes direction well • Periodically resistant to taking direction • Frequently resistant to taking direction 						
Cooperation <ul style="list-style-type: none"> • Usually cooperative • Refuses to attend school/work • Refuses to follow rules/requests 						
Willingness to Ask for Assistance <ul style="list-style-type: none"> • Peers • Co-workers • Acquaintances • Persons in authority 						
Physical Mobility <ul style="list-style-type: none"> • Moves at least at a moderate to average pace • Difficulty with stairs/minor obstacles • Ambulatory but moves at slower pace • Needs to sit/stand in one area 						

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Acts/Speaks Aggressively <ul style="list-style-type: none"> • Never • Monthly • Weekly • Daily • Hourly 						
Withdrawal or Inattentive Behavior <ul style="list-style-type: none"> • Keeps away from people • Expresses unusual fears • Shows little interest in activities 						
Behavior That Interferes with Activities of Others <ul style="list-style-type: none"> • Yelling,. Screaming • Clinging • Laughing/crying for no reason • Interrupting 						
Unusual or Repetitive Behaviors/Habits <ul style="list-style-type: none"> • Pacing • Rocking • Twirling fingers • Twitching 						
Inappropriate Social Behavior <ul style="list-style-type: none"> • Excessive touching and hugging • Burping • Excessive swearing • Other inappropriate behavior 						
Injurious to Self/Others <ul style="list-style-type: none"> • Banging head • Pulling hair • Biting • Scratching • Hitting • Punching 						

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Responding to Signs, Etc. <ul style="list-style-type: none"> • Restrooms • Danger • Stop • Alarms 						
Money Skills <ul style="list-style-type: none"> • Can independently handle money • Can handle limited amount of funds • Needs assistance with purchases 						
Independent Street Crossing <ul style="list-style-type: none"> • 4 lane street (with or without lights) • 2 lane street (with or without lights) • Unable to cross streets alone 						
Travel Skills <ul style="list-style-type: none"> • Can make own travel arrangements • Can use mass transit independently • Could benefit from travel training • Unable to travel train 						
Physical Limitations <ul style="list-style-type: none"> • Medical restrictions • Medications • Physical disability 						
Activities, Foods and Items That Are Reinforcing						

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	Consumer Input	Parent, Family, and Friend Input	Staff Input Residential & Other	Other Input
Leisure Skills/Interests				
Chores & Non-Work Responsibilities				
Work Experiences <ul style="list-style-type: none"> • Employment Site • Job Tasks Performed • Dates • Hours • Wages 				
Schedule Preferences <ul style="list-style-type: none"> • Monday-Friday Only • Weekends/Holidays Okay • Morning Start • Afternoon start • Evening start • Full-time • Part-time 				

Summary of Consumer Likes, Dislikes, Preferences, and Other Pertinent Information:

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