|  |  |
| --- | --- |
| **Student Initials:** | **Accommodations:****Modifications:****Supports/Supplementary Aids:****Augmentative and assistive technology(s) used:** |
| **How does your student currently respond to communicative attempts?** (list current response options) |
| **How does your student participate in academic activities?**(What level of assistance is needed for participation) |
| **What is the student’s current level of engagement?** (Does the student share joint attention during academic tasks) |