

What's Included?

IEP AND SKILL TRACKING SHEETS

SELF-GRAPHING

These sheets are designed for either breaking a skill down into sequential steps or tracking objectives from IEP goals.

Versions with 5 and 10 trials.

All can be graphed on the sheet itself.

Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here:
<https://youtu.be/vgllHFRDjOU>

IEP GOAL DATA SHEET
 Record the performance (independent or prompt code) in the box next to trials 1-5. Then graph the percentage of independent responses on the numbers above.

IEP GOAL: *Answer basic "what" and "where" questions* STUDENT NAME: *Jew Dent*

OBJECTIVES:
 1. Answer what questions regarding names of objects visible
 2. Answer Where questions involving familiar actions (eg where are you)
 3. Answer what questions about objects not visible

Date: *10/26*

OBJ	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
G	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
R	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80
A	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60
P	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40
H	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
Trial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1	V	V	+	+	+	+	+	+	+	+	+	+	+	+	+
2	V	V	+	+	+	+	+	G	+	+	+	+	+	+	+
3	G	+	V	+	+	+	+	G	G	+	+	+	+	+	+
4	I	D	+	+	+	+	+	G	G	+	+	+	+	+	+
5	+	V	V	+	+	+	+	G	P	+	+	+	+	+	+
6	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
7	+	V	D	+	+	+	+	G	+	+	+	+	+	+	+
8	V	+	+	+	+	+	+	G	+	+	+	+	+	+	+
9	+	+	+	+	G	+	+	+	G	+	+	+	+	+	+
10	V	+	+	+	+	+	+	G	+	+	+	+	+	+	+

Legend: I=Independent, V=verbal prompt, Vi=Visual (eg, number line), G=gestural prompt, D=positional prompt, P=Physical, X=incorrect

IEP GOAL DATA SHEET
 Record the performance (independent or prompt code) in the box next to trials 1-5. Then graph the percentage of independent responses on the numbers above.

IEP GOAL: _____ STUDENT NAME: _____

OBJECTIVES: _____

Date: _____

OBJ	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
G	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
R	80	80	80	80	80	80	80	80	80	80	80	80	80	80	80
A	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60
P	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40
H	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20
Trial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1															
2															
3															

Legend: I=Independent, V=verbal prompt, Vi=Visual (eg, number line), G=gestural prompt, D=positional prompt, P=Physical, X=incorrect

TEACHING PROGRAM DATA SHEET
 Record the performance (independent or prompt code) in the box next to trials 1-5. Then graph the percentage of independent responses on the numbers above.

Skill: _____ Student Name: _____

Program Steps:

- 1.
- 2.
- 3.
- 4.

Date: _____

Step	1	2	3	4	5
G	100	100	100	100	100
R	80	80	80	80	80
A	60	60	60	60	60
P	40	40	40	40	40
H	20	20	20	20	20
Trial	0	0	0	0	0
1					
2					
3					
4					
5					

Legend: I=Independent, V=verbal prompt, Vi=Visual (eg, number line), G=gestural prompt, D=positional prompt, P=Physical, X=incorrect

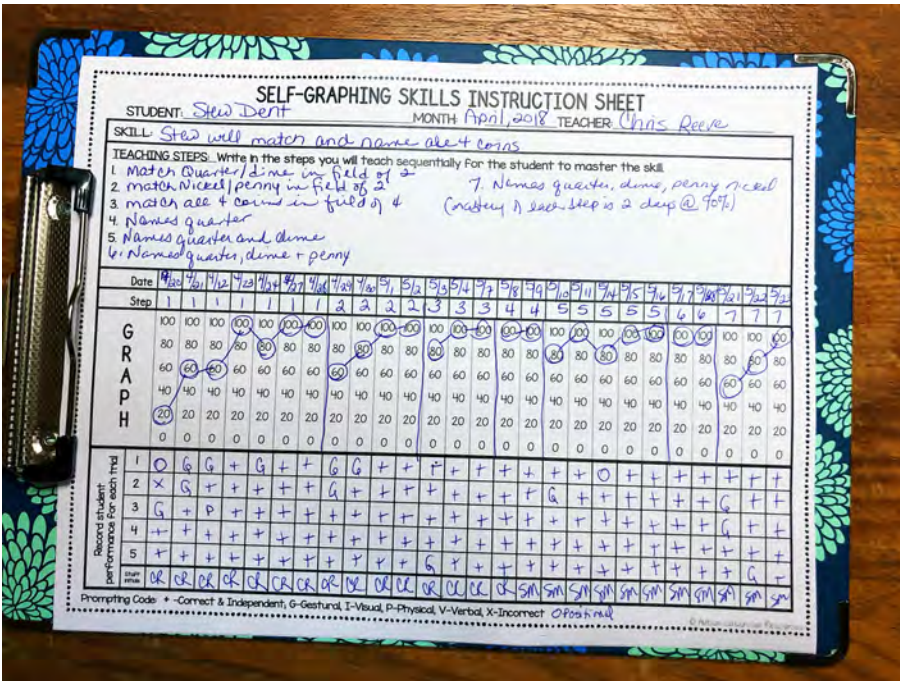
5 trials

10 trials

What's Included?

IEP & SKILL TRACKING SHEETS (LANDSCAPE)

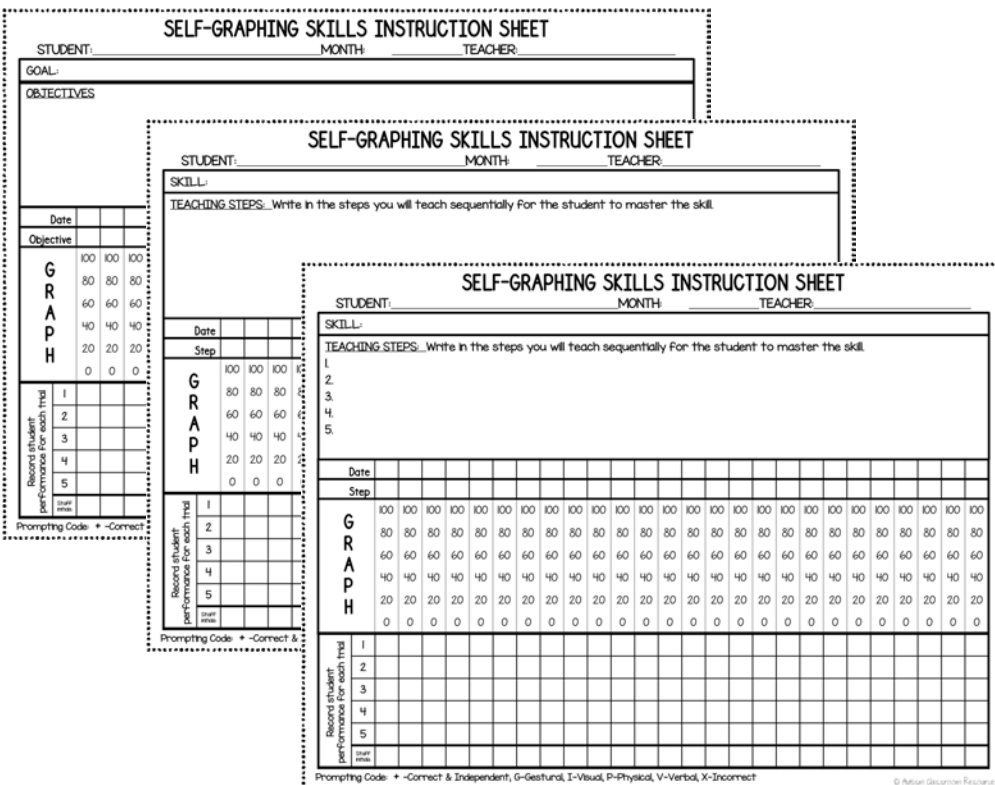
SELF-GRAPHING



These sheets are the same as the portrait sheets, but only include 5 trials. However, you can track skills over a longer time period (1 month) on these.

Set up for IEP goals/objectives and skills with sequential steps.

Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vgliHFRDJOU>



What's Included?

NATURALISTIC DATA SHEETS (GROUP & INDIVIDUAL)

The image shows a stack of 'NATURALISTIC DATA COLLECTION SHEET' forms. The top sheet is a 'GROUP' version for a 'Morning Meeting' activity. It is dated May 2018 and filled out by teacher Chris Peave. The data is organized into columns for students: Sam, Sally, Kendra, Brittany, Rajesh, Elaine, Sheldon, Leonard, Penny, and Howard. Each student's row contains a list of skills and a grid of data points (+, -, G, I, V, P, X) representing performance across 10 activities.

Student	Activity 1	Activity 2	Activity 3	Activity 4	Activity 5	Activity 6	Activity 7	Activity 8	Activity 9	Activity 10
Sam	Answers question correctly	Remains in seat for 5 minutes w/o prompt or school on calendar	Identifies if home or school on calendar	Greets 3 peers appropriately	Raises hand & waits to be called on					
Sally	Passes material to neighbor	Passes material to neighbor	Follows 1-step directions	Follows 1-step directions	Follows 2-step directions					
Kendra	Requests songs & books when asked	Greets peer w/ SGD/AAC	Responds verbally when name called	Names items in a book						
Brittany	Looks at adult when requesting	Names peers who show picture								
Rajesh										
Elaine	Looks at adult when name called	Follows 2-step directions	Answers what questions	Answers fact/yes/no questions						
Sheldon	Follows 1-step directions	Asks questions relevant to topic	Answers who questions	Raises hand & waits to be called on	Requests desired items					
Leonard		Greets peers and adults verbally		Asks for help when needed						
Penny										
Howard										

Code: + -Correct & Independent, G-Gestural, I-Visual, P-Physical, V-Verbal, X-Incorrect

These data sheets are designed to take sample data during group activities for multiple students. Or you can use the individual version to take data for one student across a variety of activities. There are enough boxes on this sheet for 5 data points per skill. And you can track up to 10 students (or 10 activities if using the individual version) on each sheet.

I use these to take weekly data on each student in an activity. These are similar to the free data sheet I've had on my blog and there is a free video tutorial that shows how I use them here.

<https://acrlinks.com/spedtraining-data>

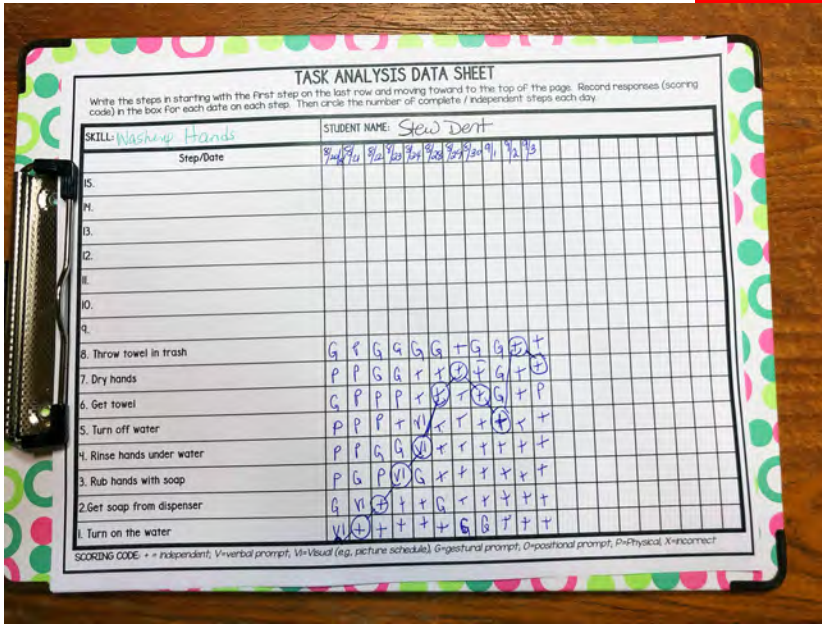
Includes PowerPoint with grids you can type in (so yours won't be handwritten)

What's Included?

TASK ANALYSIS DATA SHEETS

SELF-GRAPHING

This self-graphing task analysis data sheet is designed to be used from the bottom up so that you can circle the number of correct responses (circle the box of the corresponding number as shown above) to graph the students' progress.



Example included with handwashing steps

TASK ANALYSIS DATA SHEET
Write the steps in starting with the first step on the last row and moving toward to the top of the page. Record responses (scoring code) in the box for each date on each step. Then circle the number of complete / independent steps each day.

SKILL: **Washing Hands** STUDENT NAME: **Stew Dent**

Step/Date	9/24/19	9/25/19	9/26/19	9/27/19	9/28/19	9/29/19	9/30/19	10/1/19	10/2/19	10/3/19
15.										
14.										
13.										
12.										
11.										
10.										
9.										
8. Throw towel in trash	G	P	G	G	G	G	G	G	G	+
7. Dry hands	P	P	G	G	r	r	r	+	+	+
6. Get towel	G	P	P	P	r	+	+	+	+	+
5. Turn off water	P	P	P	P	V	r	r	+	+	+
4. Rinse hands under water	P	P	G	G	V	r	r	+	+	+
3. Rub hands with soap	P	G	P	V	G	r	r	+	+	+
2. Get soap from dispenser	G	V	+	+	G	r	r	+	+	+
1. Turn on the water	V	+	+	+	+	G	B	r	+	+

SCORING CODE: + = independent, V=verbal prompt, Vi=Visual (e.g. picture schedule), G=gestural prompt, O=positional prompt, P=Physical, X=incorrect

TASK ANALYSIS DATA SHEET
Write the steps in starting with the first step on the last row and moving toward to the top of the page. Record responses (scoring code) in the box for each date on each step. Then circle the number of complete / independent steps each day.

SKILL: _____ STUDENT NAME: _____

Step/Date										
15.										
14.										
13.										
12.										
11.										
10.										
9.										
8. Throw towel in trash										
7. Dry hands										
6. Get towel										
5. Turn off water										
4. Rinse hands under water										
3. Rub hands with soap										
2. Get soap from dispenser										
1. Turn on the water										

V=verbal prompt, Vi=Visual (e.g. number line), G=gestural prompt, O=positional prompt, P=Physical, X=incorrect

Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vgIiHFRDjOU>

What's Included?

ACADEMIC TRAVEL CARDS

Travel cards are a truly useful tool for students who travel to different environments during the day. It's hard to track skills like attending and being on-task across all those environments. Travel cards require teachers of those environments to just check several items that the student exhibited that day in their class. Then the card travels with the student back to the homeroom or special education case manager.

This packet has 2 formats with a variety of options (see first below).

Academic Travel Card

Name: Stew Dent Week: 2/20/14

Directions: Check off which each item that applies to your period and give the card back to the student to return to Ms. Rive

	1 st period	2 nd period	3 rd period	4 th period	5 th period	6 th period	
Monday	<input checked="" type="checkbox"/> Followed directions <input checked="" type="checkbox"/> Brought materials <input checked="" type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input checked="" type="checkbox"/> Followed directions <input checked="" type="checkbox"/> Brought materials <input checked="" type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input checked="" type="checkbox"/> Followed directions <input checked="" type="checkbox"/> Brought materials <input checked="" type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Tuesday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Wednesday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Thursday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Friday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Totals							
Comments							

Includes Check off which PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vgliHFRDjOU>

Academic Travel Card

Name: _____ Week: _____

Directions: Check off which each item that applies to give the card back to the student to return to _____

	1 st period	2 nd period	3 rd period	4 th period	
Monday	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated
Tuesday	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated
Wednesday	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated
Thursday	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated
Friday	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated	<input type="checkbox"/> Turn in homework <input type="checkbox"/> Materials ready <input type="checkbox"/> Took notes <input type="checkbox"/> Participated
Totals					
Comments					

Academic Travel Card

Name: _____ Week: _____

Directions: Check off which each item that applies to give the card back to the student to return to _____

	1 st period	2 nd period	3 rd period	4 th period	5 th period	6 th period	7 th period	
Monday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Tuesday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Wednesday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Thursday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Friday	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions	<input type="checkbox"/> Followed directions <input type="checkbox"/> Brought materials <input type="checkbox"/> Answered questions
Totals								
Comments								

Academic Travel Card

Name: _____

Directions: Check off which each item give the card back to the student to return to _____

	1 st period	2 nd period	3 rd period
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Totals			
Comments			

Academic Travel Card

Name: _____ Week: _____

Directions: Check off which each item that applies to your period and give the card back to the student to return to _____

	1 st period	2 nd period	3 rd period	4 th period	5 th period	6 th period	7 th period
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Totals							
Comments							

2 forms with check-offs. 2 blank with 3 checks or 4 check-off items to complete on your own with individualized skills.

What's Included?

ACADEMIC TRAVEL CARDS

The second format has several variations including this one with attempted, performed and whether the student was anxious for specific skills.

Travel Card

Directions: Check off the performance of each skill and give the card back to the student to return to _____

Name:	Date:		
Raters:	Notes:	Attempted	Anxious
1 st Period		Performed	
Engaged himself in appropriate activity			
Responded to social initiation by peer			
Initiated interaction with peer or adult			
Remained in class for _____ minutes			

Travel Card

Directions:

Name:	Date:	
Raters:	Notes:	
1 st Period		
Engaged h		
Responded		
Initiated i		
Remained		
2 nd Period		
Engaged h		
Responded		
Initiated i		
Remained		
3 rd Period		
Engaged h		
Responded		
Initiated i		
Remained		
4 th Period		
Engaged h		
Responded		
Initiated i		
Remained		
5 th Period		
Engaged h		
Responded		
Initiated i		
Remained		
6 th Period		
Engaged h		
Responded		
Initiated i		
Remained		
7 th Period		

Travel Card

Directions: Check off the performance of each skill and give the card back to the student to return to _____

Name:	Date:			
Raters:	Notes:	Attempted	Performed	Anxious
1 st Period				
2 nd Period				
3 rd Period				
4 th Period				
5 th Period				
6 th Period				
7 th Period				

Travel Card

Name:	Date:			
Raters:	Notes:	Student	Teacher	Average
1 st Period				
2 nd Period				
3 rd Period				
4 th Period				
5 th Period				
6 th Period				
7 th Period				

Travel Card

Name:	Date:		
Raters:	Notes:		
1 st Period			
2 nd Period			
3 rd Period			
4 th Period			
5 th Period			
6 th Period			
7 th Period			

Forms with 7 or 8 periods, different raters, attempted / performed / anxious, or blanks for you to use as needed.

Travel Card

Name:	Date:				
Raters:	Notes:	Mon.	Tues.	Wed.	Thurs.
1 st Period					
2 nd Period					
3 rd Period					
4 th Period					
5 th Period					
6 th Period					
7 th Period					
8 th Period					

Travel Card

Name:	Date:				
Raters:	Notes:	Mon.	Tues.	Wed.	Thurs.
1 st Period					
2 nd Period					
3 rd Period					
4 th Period					
5 th Period					
6 th Period					
7 th Period					

Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vgliHFRDjOU>

Travel Card

Name:	Date:		
Raters:	Notes:		
1 st Period			
2 nd Period			
3 rd Period			
4 th Period			
5 th Period			
6 th Period			
7 th Period			
8 th Period			

Travel Card

Name:	Date:		
Raters:	Notes:		
1 st Period			
2 nd Period			
3 rd Period			
4 th Period			
5 th Period			
6 th Period			
7 th Period			

Forms with blanks for activities, or 7 and 8 periods. Set up for days of the week or 5 blank columns to use as you need.

What's Included?

BASIC RUBRIC TEMPLATES

I've included some basic formats for creating your own rubrics for assessing skills. Rubrics are great tools for assessing the quality of skills, particularly social skills.

Basic Rubric
Circle the appropriate indicator for each behavior.

Name: *Stew Dent* Date: *3/22/18*
Activity: *Morning Meeting* Rater: *Sally Miller*

Skill	M	T	W	Th	F	Points Received
<i>Makes appropriate eye contact when speaking to partner</i>	0	1	1	2	2	
<i>Shifts gaze to what partner is looking at</i>	1	3	4	1	3	
<i>Self monitors volume of voice when speaking</i>	3	3	2	4	4	

0	1	2	3	4
No success, even with help	Needed repeated prompting	Needed some prompting, some physical or verbal	Visual prompting only with no more than 1 other cue	Independent success

Basic Rubric
Circle the appropriate indicator for each behavior.

Name: _____ Date: _____
Activity: _____ Rater: _____

Skill	M	T	W	Th	F	Points Received

0	1	2	3	4
No success, even with help	Needed repeated prompting	Needed some prompting, some physical or verbal	Visual prompting only with no more than 1 other cue	Independent success

Days of the Week boxes for each skill / indicator with 2 different rubrics and a blank rubric

Basic Rubric
Circle the appropriate indicator for each behavior.

Name: _____ Date: _____
Activity: _____ Rater: _____

Behavior	0	1	2	3	4	Points Received

0	1	2	3	4
No success, even with help	Needed significant help	Needed less assistance, but it was required	Success without prompting, but not best quality	Independent success with high quality

Write the indicators into the points themselves for a daily rubric. One suggested rubric and 1 blank.

Basic Rubric
Circle the appropriate indicator for each behavior.

Name: _____ Date: _____
Activity: _____ Rater: _____

Skill	M	T	W	Th	F	Points Received

0	1	2	3	4
No success, even with help	Needed significant help	Needed less assistance, but it was required	Success without prompting, but not best quality	Independent success with high quality

Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vgliHFRDjOU>

What's Included?

WORK PRODUCT LABELS

Print these on label paper and cut them apart. Then have staff complete them for work assignments with a permanent product. They can then stick them on the back of the worksheet, essay, art work, etc. to allow you to know what assistance was provided.

Name: <i>Stew Dent</i>	Date: <i>5/7/18</i>
Setting: Gen Ed <input checked="" type="checkbox"/> Sped Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	
Independent? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Prompt: <input checked="" type="checkbox"/> Visual Prompt Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/>	
Assistance: <input checked="" type="checkbox"/> Adapted Assign. <input checked="" type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support	
Notes:	

Name: <i>Stew Dent</i>	Date: <i>5/7/18</i>
Setting: <input checked="" type="checkbox"/> Gen Ed <input type="checkbox"/> Sped Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	
Independent? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Prompt: <input type="checkbox"/> Visual Prompt Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/>	
Assistance: <input type="checkbox"/> Adapted Assign. Extra Time <input checked="" type="checkbox"/> Visual Support	
Notes:	

Three different versions included. I've included them in Powerpoint but not blank versions.

Name: _____ Date: _____	Name: _____ Date: _____
Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>
Independent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Independent? Yes <input type="checkbox"/> No <input type="checkbox"/>
Prompt: <input type="checkbox"/> Visual Prompt Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/>	Prompt: <input type="checkbox"/> Visual Prompt Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/>
Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support	Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support
Notes:	Notes:

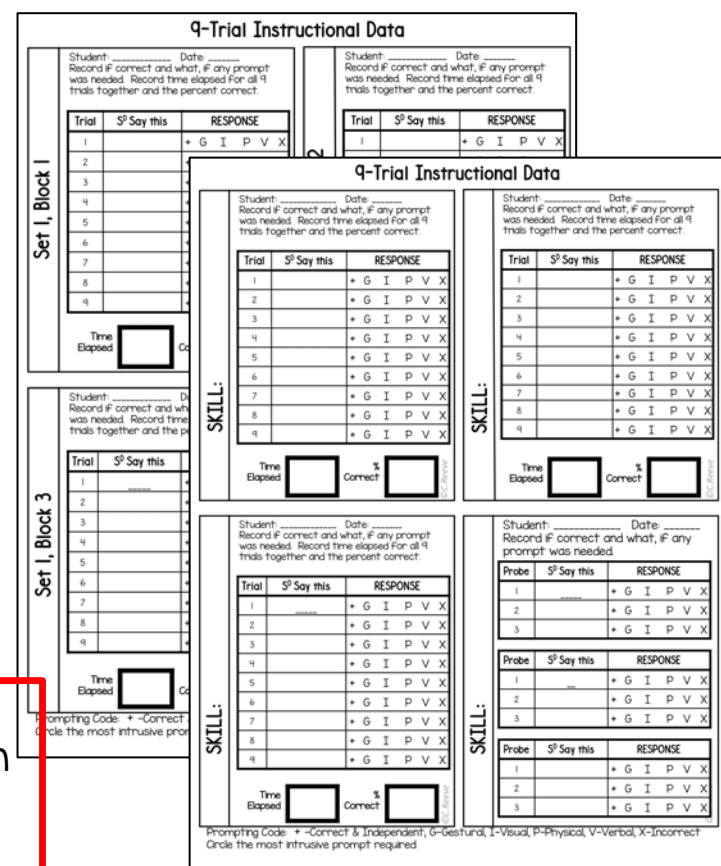
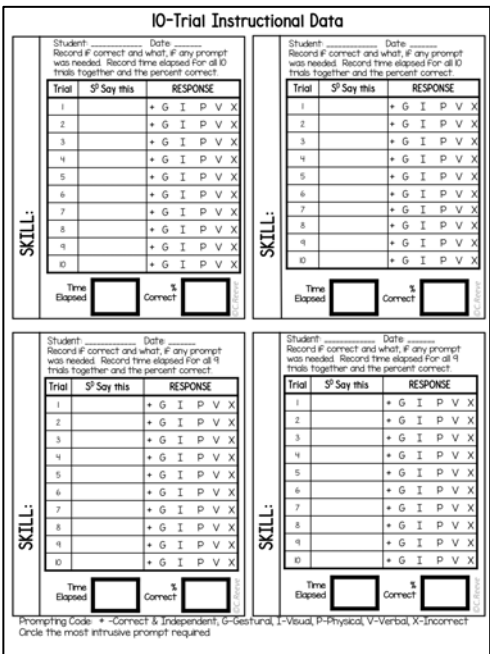
Work Sample Data Collection		Work Sample Data Collection	
Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>
Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt		Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt	
Notes:		Notes:	
Work Sample Data Collection		Work Sample Data Collection	
Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>
Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt		Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt	
Notes:		Notes:	
Work Sample Data Collection		Work Sample Data Collection	
Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>
Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt		Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt	
Notes:		Notes:	
Work Sample Data Collection		Work Sample Data Collection	
Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>	Setting: Gen Ed <input type="checkbox"/> Sped <input type="checkbox"/> Speech <input type="checkbox"/> OT <input type="checkbox"/> Other <input type="checkbox"/>
Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt		Assistance: <input type="checkbox"/> Adapted Assign. <input type="checkbox"/> Extra Time <input type="checkbox"/> Visual Support <input type="checkbox"/> Visual Prompt <input type="checkbox"/> Verbal Prompt <input type="checkbox"/> Gesture <input type="checkbox"/> Partial physical <input type="checkbox"/> Physical prompt	
Notes:		Notes:	

What's Included?

DISCRETE TRIAL DATA CARDS

These cards are blank versions of the cards I use in my Discrete Trial Kits for Beginning Learning Skills and Colors. I've included the 9-trial version we use for receptive language when presenting blocks of 3 targets. I also included a 10 trial version for more conventional use.

These are great to print on label paper and cut out to use when mixing and varying skills during trials. Put different skills on cards and flip through them (or on the same page). Then cut them apart and paste them with the other data on that skill.



Includes PowerPoint with grids you can type in. For a tutorial on how to do this, go here: <https://youtu.be/vglHFRDjOU>

Prompting Code: + -Correct & Independent, G-Gestural, I-Visual, P-Physical, V-Verbal, X-Incorrect
Circle the most intrusive prompt required.

