

4. Does your student have a way of indicating “yes” and “no”? If so, please describe.

5. Do you think your student understands more than he/she is able to express? Why?

6. Are there activities in your family life in which you feel your student cannot participate (or participate equally) due to speech involvement? Please describe.

7. What would you consider to be the greatest obstacle for your student in terms of communication? Please describe.

8. Would you and your family be comfortable with your student using a communication device? (If no, please state concerns)

When finished with this form, please return it as soon as possible to your child’s Special Education Teacher or Speech Therapist.