

Student Name: _____ Complete the following and note any observations to support your response:	Date: Mon	Date: Tues	Date: Wed	Date: Thur	Date: Fri	Date: Sat	Date: Sun
Student's ability to stay on task at the <u>beginning</u> of the day?							
Student's ability to stay on task at the <u>end</u> of the day?							
Students best time of day today was _____							
Student did _____ well today							
Rate: Distractibility 1 (Very distracted) to 10 (On task consistently)							
Rate: Ability to stay focused 1 (Frequently unfocused) to 10 (Consistently attentive)							
Rate: Emotionality 1 (Emotionally upset) to 10 (Calm/satisfied)							
Rate: Ability to switch tasks 1 (Switching is difficult) to 10 (Switches easily)							
Rate: Organization 1 (Organized) to 10 (Unorganized)							
Rate: Socialization 1 (Unsocial or struggles socially) to 10 (Appropriately social)							
Rate: Ability to complete tasks 1 (Frequently incomplete) to 10 (Consistently complete)							
Rate: Ability to stay on task 1 (Off task a lot) to 10 (Stays on task)							
Rate: Ability to initiate a task 1 (Hesitates) to 10 (Starts right in)							
Rate: Preparedness 1 (Not prepared) to 10 (Well prepared)							
Rate: Need for Clarification of Directions 1 (Frequently asks for clarification) to 10 (No need for clarification)							
Rate: Impulsivity Verbal interruption? Waiting turn? 1 (Frequently Impulsive) to 10 (Not Impulsive)							
Rate: Hyperactivity, Restlessness, Fidgetiness, Talkativeness? 1 (Frequently Hyperactive) to 10 (Not Hyperactive)							

The time during the day when the student seemed more “challenged” than usual?							
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