Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Triennial Re-Evaluation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

S.M.A.R.T Goal:



Objective One:



Objective Two:



Objective Three:



Attendance Dates (Present):

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

Attendance Dates (Absent):

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

| **Level of Support Codes**  |
| --- |
| **Code** | **Prompt** | **Code** | **Prompt** | **Code** | **Prompt** | **Code** | **Prompt** | **Code** | **Prompt** |
| I | Independent | G | Gesture | VP | Visual Prompt | FP | Full Physical Prompt | R | Refusal |
| V | Verbal Prompt | D | Demonstration | PP | Partial Physical Prompt | PH | Peer Helper | N/A | Not Applicable |

Daily Data Sheet

| Date | Worked On(Circle One) | Level of Support Needed  | Success RateTrials or Percentage  | Mastered Yes / No  | Notes |
| --- | --- | --- | --- | --- | --- |
|  | O1 | O3 |  | **Trials**\_\_\_\_ Out of \_\_\_\_ |  |  |
| O2 | G | **Percentage**\_\_\_% Towards \_\_\_% |
|  | O1 | O3 |  | **Trials**\_\_\_\_ Out of \_\_\_\_ |  |  |
| O2 | G | **Percentage**\_\_\_% Towards \_\_\_% |
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|  | O1 | O3 |  | **Trials**\_\_\_\_ Out of \_\_\_\_ |  |  |
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Over-all Comments: 