



Assessment Planning & Data Collection

University of Kentucky Assistive Technology (UKAT) Project

Student Name: _____

DOB/Age: _____

School/District: _____

Date: _____

***NOTE: Complete a new form for each demand.**

Environment(s), Context(s), & Demand (all or part of a task): _____

Student Perception of Demand: _____

Student Response to Demand: _____ Observed Assumed Stated

Area of function for demand:

- Existence (Activities of Daily Living)
- Communication

- Body Support, Protection, & Positioning
- Travel & Mobility
- Environmental Interaction

- Education & Transition
- Sports, Fitness, & Recreation

Assessment Procedures

What Do We Need to Know (goals of the assessment)	Planned Activities/What We Did (date(s), location(s), strategies, non-technology, & technology adaptations) (refer to the <i>Sample Alternative Strategies & WATI Continuum of Considerations</i> for more information on strategies & adaptations)	What We Found (including student perceptions, medical information, & optimal positioning)
	Person Responsible:	

Student Name:

Date:

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	Person Responsible:	
	Person Responsible:	
	Person Responsible:	

NEXT STEPS: Create assessment report. Use *Assessment Report Outline* as a reference tool in writing the report.