Teachers Functional Performance Assessment

Student: _____ Age: _____ Date: _____

School: _____Teacher: _____

For each question below, place a check on the appropriate line. If the student performs the task but takes too much time, mark the yes box and but a note in the comment

Classroom/Library/Art

Can position at all work stations ☐ Yes ☐ No ☐ N/A - Comment: _____

Can access all work material ☐ Yes ☐ No ☐ N/A - Comment: _____

Can move between all work stations ☐ Yes ☐ No ☐ N/A - Comment: _____

Doors

Can open and close all doors ☐ Yes ☐ No ☐ N/A - Comment: _____

Can move through doorways ☐ Yes ☐ No ☐ N/A - Comment: _____

Hallways

Can travel required distance ☐ Yes ☐ No ☐ N/A - Comment: _____

Can move through crowded hallway ☐ Yes ☐ No ☐ N/A - Comment: _____

Can use water fountain ☐ Yes ☐ No ☐ N/A - Comment: _____

Lunchroom

Is safe on slippery floor ☐ Yes ☐ No ☐ N/A - Comment: _____

Can go through lunch line ☐ Yes ☐ No ☐ N/A - Comment: _____

Can carry lunch tray ☐ Yes ☐ No ☐ N/A - Comment: _____

Can maneuver in tight space ☐ Yes ☐ No ☐ N/A - Comment: _____

Can sit at lunch table ☐Yes ☐ No ☐ N/A - Comment: _____

Restroom

Is safe on wet floor ☐ Yes ☐ No ☐ N/A - Comment: _____

Can move in and out of toilet stall ☐ Yes ☐ No ☐ N/A - Comment: _____

Can sit or stand at toilet ☐ Yes ☐ No ☐ N/A - Comment: _____

Can access faucet, soap and towels ☐ Yes ☐ No ☐ N/A - Comment: _____

School Bus

Can move on and off bus ☐ Yes ☐ No ☐ N/A - Comment: _____

Can sit securely on the bus ☐ Yes ☐ No ☐ N/A - Comment: _____

Playground

Can access playground ☐ Yes ☐ No ☐ N/A - Comment: _____

Can play on outdoor equipment ☐ Yes ☐ No ☐ N/A - Comment: _____

Can negotiate stairs or ramps ☐ Yes ☐ No ☐ N/A - Comment: _____

Assemblies/Sports Events

Can access assembly room/gym ☐ Yes ☐ No ☐ N/A - Comment: _____

Can access athletic field ☐ Yes ☐ ☐ N/A - Comment: _____

Can sit with peers ☐ Yes ☐ No ☐ N/A - Comment: _____

Community Activities

Can access transit systems:

     cars ☐ Yes ☐ No ☐ N/A - Comment: _____

     buses/vans ☐ Yes ☐ No ☐ N/A - Comment: _____

     trains ☐ Yes ☐ No ☐ N/A - Comment: _____

Can access buildings ☐ Yes ☐ No ☐ N/A - Comment: _____

Can access goods and products ☐ Yes ☐ No ☐ N/A - Comment: _____

Can push grocery cart ☐ Yes ☐ No ☐ N/A - Comment: _____

Can carry purchases ☐ Yes ☐ No ☐ N/A - Comment: _____

Additional Requests

Teacher would like more information and instruction about the student's:

    Wheelchair   ☐ Yes ☐ No ☐ N/A

    Walker   ☐ Yes ☐ No ☐ N/A

    crutches   ☐ Yes ☐ No ☐ N/A

    orthosis   ☐ Yes ☐ No ☐ N/A

Teacher would like more information about

    positioning the student. ☐ Yes ☐ No ☐ N/A

    Teacher would like assistance with adapting educational materials. ☐ Yes ☐ No ☐ N/A

_____ Teacher   Date _____