



## Beyond 21 Participant Application

Participant's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

### **Communication:**

#### Receptive Speech

- |                                   |     |    |
|-----------------------------------|-----|----|
| -understands complex instructions | yes | no |
| -understands simple instructions  | yes | no |
| -understands sign language        | yes | no |

#### **Expressive Language**

- |                                |     |    |
|--------------------------------|-----|----|
| -uses sentences to communicate | yes | no |
| -has some vocabulary           | yes | no |
| -uses short sentences          | yes | no |
| -uses sign language            | yes | no |
| -uses a communication device   | yes | no |
| -nonverbal                     | yes | no |

Additional information : \_\_\_\_\_

\_\_\_\_\_

**Mobility**

- Independent yes no
- Needs assistance on stairs yes no
- Walks with assistance yes no
- Used wheelchair independently yes no
- Uses wheelchair with assistance yes no
- Uses a walker

Additional information: \_\_\_\_\_

\_\_\_\_\_

**Toileting**

- completely dependent yes no
- needs assistance with menses yes no
- rarely requires assistance yes no
- independent yes no

Additional information: \_\_\_\_\_

\_\_\_\_\_

**Behaviour**

	Physical aggression	frustration	Emotional Outbursts without physical aggression	Extreme shyness	Verbal aggression
never					
rarely					
sometimes					
often					

Additional information: \_\_\_\_\_

**Likes, strengths and dislikes**

	<u>Likes</u>	<u>Strengths</u>	<u>Dislikes</u>
<u>Academics</u>			
<u>Life skills</u>			
<u>Physical Activity</u>			
<u>Recreation and leisure</u>			
<u>Community participation</u>			

Additional Comments (things not captured in the above questions)

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Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Program Director: \_\_\_\_\_ Date: \_\_\_\_\_