



DSAmd

DOWN SYNDROME
ASSOCIATION
OF MARYLAND

Example School Communication Logs/Tools

HOME NOTE				Date:	9/28/15
Morning Routine I remembered all of my responsibilities. I got busy right away. I worked hard. I <u>Sophia</u> spells her name each day!	Morning Meeting I participated. I sat on my carpet spot. We played _____. We sang _____.	Reading I worked on letter <u>j</u> . I read the word _____. I worked hard. I read the story _____.	Group Work I waited my turn. I worked well with others. I worked hard. I worked on <u>letters</u> . I <u>knew my letters</u> .		
Math I learned about <u>3 + 4 = 7</u> so's + red. I really understood. I worked hard. I got them all right.	Snack I ate it all. I opened my containers. I cleaned up my area. I enjoyed a story. <u>We had donut holes as a birthday treat</u>	Behavior I followed directions. I moved up on the clip chart. I needed a lot of reminders.	Socialization I played with a friend. I worked well with a partner. I shared with a friend.		
Today I had.... PT OT Speech P.E.	Communication I remembered to raise my hand.	Transitions I quietly moved from one activity to another. I sat quietly and waited for instructions.	Additional Information I need to bring in Today I <u>did a great job</u> getting my picture I also <u>taken</u> .		
Comments: Another fidgety Monday!! Power went off today at school. She was fine! Teacher Signature: Mrs. G.		Comments: Parent Signature:			



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HOME NOTE

Name: Sam Date: 2/27/23

GROUP WORK <input checked="" type="checkbox"/> I participated <input checked="" type="checkbox"/> I followed directions <input checked="" type="checkbox"/> I waited my turn <input checked="" type="checkbox"/> I sat next to classmates <input checked="" type="checkbox"/> I made choices	READING I worked on: <input type="checkbox"/> Sight words <input checked="" type="checkbox"/> Phonics <input checked="" type="checkbox"/> Reading a book <input checked="" type="checkbox"/> Answering questions <input type="checkbox"/> Spelling	MATH I worked on <input checked="" type="checkbox"/> Money <input type="checkbox"/> numbers <input type="checkbox"/> adding / subtracting <input type="checkbox"/> multiplication / division <input type="checkbox"/> word problems	INDEPENDENT WORK I worked primarily <input type="checkbox"/> Independently <input checked="" type="checkbox"/> needed help I completed # <u>2</u> tasks
TRANSITIONS Today I transitioned... <input checked="" type="checkbox"/> independently <input checked="" type="checkbox"/> with verbal reminders <input type="checkbox"/> With visual reminders <input type="checkbox"/> With gestural reminders	MEAL TIMES <input checked="" type="checkbox"/> I sat at the table <input checked="" type="checkbox"/> I opened containers <input type="checkbox"/> I used utensils <input checked="" type="checkbox"/> I cleaned up my area I ate: <input checked="" type="checkbox"/> all <input type="checkbox"/> half <input type="checkbox"/> none	BEHAVIOR AM/PM About average AM/PM Above average <input checked="" type="checkbox"/> AM/PM Fantastic AM/PM Oops, I'll try harder tomorrow	RECESS Inside / Outside <input type="checkbox"/> I played with _____ <input type="checkbox"/> I initiated interaction <input type="checkbox"/> I responded to a friend <input type="checkbox"/> I took turns <input type="checkbox"/> _____
TODAY I HAD... <input type="checkbox"/> Music <input checked="" type="checkbox"/> Speech <input type="checkbox"/> Art <input type="checkbox"/> OT <input type="checkbox"/> Library <input type="checkbox"/> PT <input type="checkbox"/> PE <input type="checkbox"/> Other: _____ <input type="checkbox"/> Computer	MY COMMUNICATION <input type="checkbox"/> I used objects <input type="checkbox"/> I used picture symbols <input type="checkbox"/> I used my device <input type="checkbox"/> I used sign language <input type="checkbox"/> I used speech	I NEED TO BRING <input type="checkbox"/> Lunch money <input type="checkbox"/> Pull ups / diapers <input type="checkbox"/> Signed form <input type="checkbox"/> Change of clothes <input type="checkbox"/> Wipes <input type="checkbox"/> Money for a trip <input type="checkbox"/> Other _____	ADDITIONAL INFORMATION

COMMENTS: Sam did great during reading and math today.

Teacher Signature: _____

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Date: _____

Daily Communication Log

My morning at school was:



Awesome! Pretty Good Okay. Not so Good. Difficult

My afternoon at school was:



Awesome! Pretty Good Okay. Not so Good. Difficult

	Tough Day	Average	Better!
Transitioning to activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hands to herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remaining in Classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking in the Hallway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bathroom:



Please note any accidents/circumstances:

Glows:

Grows:

Today I had:



music



speech



art



gym



OT



STEM



library



PT



computers

Notes from specials/therapy team:

Things we worked on today:



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Footlocker
Practice tomorrow
till 4pm!

Sam's Day

Arrival / Homeroom: Sam came in and unpacked. He checked into homeroom. He watched the morning announcements. He walked to our library to talk with ms [redacted] about work today.

English/ Piano: Ms [redacted] was not at the middle school today so she had some jobs at the library here for Sam to do. Sam had a list of books to find and then set up in the show case for women's history month. He did a great job.
Sam drank his juice @ 8:50am

Percussion/ Math: Sam completed his morning work. Sam completed a worksheet of times he has felt in each of our zones. Sam got ready for work. Sam went to the distribution center to work. He did a nice job on the bus ride. He shredded for the first 30 minutes then he emptied folders the last 30 minutes. He used his picture board to ask for help when he needed it.

Lunch: Sam ate all of his lunch and followed all directions that were given.

Career/ science: Sam played Jeopardy with the class as a review of our cells and DNA unit. He loved the music and being able to play basketball when his team answered correctly.

Drama/ gym: Sam wore his gym shirt. Sam followed along with the note taking and question of the day lesson mr. Kepriman taught. He went outside to the track to warm-up. He played Badminton with the class.







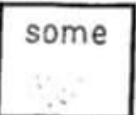
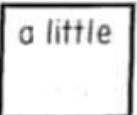

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Name: Jacob Rigway Date: 9/9/19

Daily Report

My day was:			<input type="checkbox"/> Followed directions <input type="checkbox"/> Stayed on task <input type="checkbox"/> Worked independently <input checked="" type="checkbox"/> Took redirection well <input type="checkbox"/> Needed multiple prompts <input type="checkbox"/> Communicated effectively <input checked="" type="checkbox"/> Communicated with assistance		
					
For lunch I ate: <u>meat, mash</u>		Bathroom: <u>AM</u>		PM	
				<input type="checkbox"/> wet <input checked="" type="checkbox"/> bathroom 9:20 success! 10:45	<input type="checkbox"/> wet <input checked="" type="checkbox"/> bathroom 2:10 success!
3 Things I did today:					
1. <u>music</u>					
2. <u>books</u>					
3. _____					
I communicated today mostly using:					
<input type="checkbox"/> Gestures <input type="checkbox"/> Signs <input type="checkbox"/> 1-Word Phrases <input type="checkbox"/> 2-3 Word Phrases					
Notes from: <input type="checkbox"/> Gen Ed <input type="checkbox"/> OT <input type="checkbox"/> PT <input type="checkbox"/> Speech <input checked="" type="checkbox"/> Special Ed					
We are working on: <u>- cvc word identification w/picture cues,</u> <u>from field of 2, clapping to song "Pete the Cat."</u> <u>- adapted story - The Tiny Seed</u>					
Things to practice at home: <u>id story elements from the Tiny</u> <u>seed!</u> <u>clapping to syllables, songs</u>					

Ms Cottman
Teacher or Therapist



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I communicated today mostly using:

Gestures Signs 1-Word Phrases 2-3 Word Phrases

Notes from: Gen Ed OT PT Speech Special Ed

We are working on: morning procedures
what to do in the morning with
homework folder, where to sit

Things to practice at home: _____

I communicated today mostly using:

Gestures Signs 1-Word Phrases 2-3 Word Phrases

Notes from: Gen Ed OT PT Speech Special Ed

We are working on: Retelling story - beginning, middle, end

Things to practice at home: sorting events from a story



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Date: _____

Today I had a... <ul style="list-style-type: none"><input type="radio"/> Great Day.<input type="radio"/> Good Day.<input type="radio"/> OK Day.	Today I did good with... <ul style="list-style-type: none"><input type="radio"/> Following Directions.<input type="radio"/> Following my Schedule.<input type="radio"/> Working Independently.<input type="radio"/> Working in small group.<input type="radio"/> Staying on Task.	Today I was challenged with... <ul style="list-style-type: none"><input type="radio"/> Following Directions.<input type="radio"/> Following my Schedule.<input type="radio"/> Working Independently.<input type="radio"/> Working in small group.<input type="radio"/> Staying on Task.
I went to: Speech OT PT ASL	I went to: Art PE Music Media	

I worked on:
ELA-

Math-

Other -

Date: _____

Today I had a... <ul style="list-style-type: none"><input type="radio"/> Great Day.<input type="radio"/> Good Day.<input type="radio"/> OK Day.	Today I did good with... <ul style="list-style-type: none"><input type="radio"/> Following Directions.<input type="radio"/> Following my Schedule.<input type="radio"/> Working Independently.<input type="radio"/> Working in small group.<input type="radio"/> Staying on Task.	Today I was challenged with... <ul style="list-style-type: none"><input type="radio"/> Following Directions.<input type="radio"/> Following my Schedule.<input type="radio"/> Working Independently.<input type="radio"/> Working in small group.<input type="radio"/> Staying on Task.
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I worked on:
ELA-

Math-

Other -



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Name: _____ Date: _____

Daily Report

My day was:			<input type="checkbox"/> Followed directions <input type="checkbox"/> Stayed on task <input type="checkbox"/> Worked independently <input type="checkbox"/> Took redirection well <input type="checkbox"/> Needed multiple prompts <input type="checkbox"/> Communicated effectively <input type="checkbox"/> Communicated with assistance	
<input type="checkbox"/> Great 	<input type="checkbox"/> Okay 	<input type="checkbox"/> Could've been better 		
For lunch I ate:		Bathroom: AM PM		
<input type="checkbox"/> a lot 	<input type="checkbox"/> some 	<input type="checkbox"/> a little 	<input type="checkbox"/> wet <input type="checkbox"/> bathroom success!	<input type="checkbox"/> wet <input type="checkbox"/> bathroom success!
3 Things I did today:				
1. _____				
2. _____				
3. _____				
I communicated today mostly using:				
<input type="checkbox"/> Gestures <input type="checkbox"/> Signs <input type="checkbox"/> 1-Word Phrases <input type="checkbox"/> 2-3 Word Phrases				
Notes: <input type="checkbox"/> Gen Ed (Mon) <input type="checkbox"/> SPED (Tues) <input type="checkbox"/> SLP (Wed) <input type="checkbox"/> PE (Thurs) <input type="checkbox"/> S/E (Fri)				
We are working on: _____				

Things to practice at home: _____				




Ms. Coddman
Teacher or Therapist






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Today I went to...		Date: _____			
PE	Art	Music	Speech	OT/PT	Community
Today I worked on...		Today I did well with...		Today I had a ...	
<input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Science/Social Stud. <input type="checkbox"/> Social Skills <input type="checkbox"/>		<input type="checkbox"/> Following directions <input type="checkbox"/> Following my schedule <input type="checkbox"/> Working independently <input type="checkbox"/> Working in groups <input type="checkbox"/> Completing my classroom/school jobs <input type="checkbox"/>		 Great Day  Good Day  Okay Day	
Personal Information:		I need the following items...		Comments:	
I ate well: Yes No		<input type="checkbox"/> Extra clothes <input type="checkbox"/> Snacks <input type="checkbox"/> Juice/Drinks <input type="checkbox"/> Diapers <input type="checkbox"/> Wipes <input type="checkbox"/>		_____ _____ _____	
I used the toilet today: Yes No				Parent Initials:	
BM: Yes No				_____	

Today I went to...		Date: _____			
PE	Art	Music	Speech	OT/PT	Community
Today I worked on...		Today I did well with...		Today I had a ...	
<input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Science/Social Stud. <input type="checkbox"/> Social Skills <input type="checkbox"/>		<input type="checkbox"/> Following directions <input type="checkbox"/> Following my schedule <input type="checkbox"/> Working independently <input type="checkbox"/> Working in groups <input type="checkbox"/> Completing my classroom/school jobs <input type="checkbox"/>		 Great Day  Good Day  Okay Day	
Personal Information:		I need the following items...		Comments:	
I ate well: Yes No		<input type="checkbox"/> Extra clothes <input type="checkbox"/> Snacks <input type="checkbox"/> Juice/Drinks <input type="checkbox"/> Diapers <input type="checkbox"/> Wipes <input type="checkbox"/>		_____ _____ _____	
I used the toilet today: Yes No				Parent Initials:	
BM: Yes No				_____	