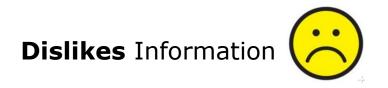




Child/Stude	nt:		Date:	Date:				
FOODS taste/texture	SMELLS	TOUCH texture/hugs/ fabrics/ light/heavy	MOVEMENT rock/bounce/ swing	VIBRATION car ride/ toys/appliances	SIGHTS lights/colors	SOUNDS voices/music pitch volume/environmental		
MUSCLES push/pull/ bear weight	PEOPLE	PLACES	ACTIVITIES	TOYS	SELF STIMULATION/ SELF SOOTHING BEHAVIORS	OTHER		
-					BEHAVIORS			

Information gathered from: _____





Chila/Studei	nt:		Date:			
FOODS taste/texture	SMELLS	TOUCH texture/hugs/ fabrics/ light/heavy	MOVEMENT rock/bounce/ swing	VIBRATION car ride/ toys/appliances	SIGHTS lights/colors	SOUNDS voices/music pitch volume/environmental
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Information gathered from: _____