

Special Needs Information

QUESTION QUICK LIST

We are so excited that your family is worshipping with us today. In order to help us serve your child better, please fill out the questions below.

Thank you.

- 1. What does your child enjoy doing?**
- 2. How does your child communicate with others?**
- 3. Is there anything in the environment that may overstimulate (overwhelm) your child? Examples: Loud noises, bright lights, etc..**
- 4. If your child is overwhelmed or distressed, how does he/she show it? Example: Holding hands over their ears, making a specific sound, trying to leave the area, etc..**

5. What calms your child down when they are upset?

**6. Has your child ever eloped from his/her environment?
Yes or No**

**7. Is your child completely potty trained?
Yes or No**

8. Does your child have any dietary needs or food allergies?

9. Anything else you would like to share?