

**BRUSH COUNTRY CO-OP**  
**ASSISTIVE TECHNOLOGY SCREENER**

**District:** \_\_\_\_\_ **Campus:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Student:** \_\_\_\_\_ **Grade:** \_\_\_\_\_  
**Completed by:** \_\_\_\_\_ **Position:** \_\_\_\_\_

Assistive technology may include devices and/or services to individuals who have difficulty completing functional/academic tasks at school. A device is defined as "any item, piece of equipment, or product system whether purchased off the shelf, modified or customized, that is used to increase, maintain or improve functional capabilities of individuals with disabilities." The term "assistive technology service" means any service that directly assists the child with a disability in the selection, acquisition, or use of an Assistive Technology Device.

**Area(s) in which the student is experiencing difficulty completing tasks or meeting IEP goals:**

- |                                                                   |                                       |
|-------------------------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Environmental Controls                   | <input type="checkbox"/> Math         |
| <input type="checkbox"/> Activities of Daily Living               | <input type="checkbox"/> Writing      |
| <input type="checkbox"/> Vocational                               | <input type="checkbox"/> Reading      |
| <input type="checkbox"/> Physical Education, Recreation & Leisure | <input type="checkbox"/> Listening    |
| <input type="checkbox"/> Seating/Positioning/Mobility             | <input type="checkbox"/> Speaking     |
| <input type="checkbox"/> Computer Access                          | <input type="checkbox"/> Study Skills |

**Specify assistive technology currently utilized:**

- |                                                                  |                                                         |
|------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Communication Board                     | <input type="checkbox"/> Portable Word Processor        |
| <input type="checkbox"/> Alternate Keyboards                     | <input type="checkbox"/> Voice Output Communication Aid |
| <input type="checkbox"/> Alerting Devices/Environmental Controls | <input type="checkbox"/> Speech Recognition Software    |
| <input type="checkbox"/> Chairs/Seats/Sitters                    | <input type="checkbox"/> Switches for Access            |
| <input type="checkbox"/> Word Prediction Software                | <input type="checkbox"/> Graphic Organizers             |
| <input type="checkbox"/> White Board                             | <input type="checkbox"/> Audio Books                    |
| <input type="checkbox"/> Wheelchair                              | <input type="checkbox"/> Switch-adapted Toys            |
| <input type="checkbox"/> Magnifiers                              | <input type="checkbox"/> Assistive Listening Device     |
| <input type="checkbox"/> Handheld Readers                        | <input type="checkbox"/> Feeding Utensils               |
| <input type="checkbox"/> Walker                                  |                                                         |

**Effectiveness of Device/Tool:**

- ☐ Using implemented technology, the student is able to complete tasks independently.
- ☐ The student is not independent with the solutions currently in place.
- ☐ The student is independent in task completion with the use of standard classroom equipment.

**Recommendations:**

- ☐ With assistive technology devices and services currently in place, the student can complete instructional tasks and meet IEP goals.
- ☐ No assistive technology device or service is required.
- ☐ Appropriate assistive technology solutions are not known to the IEP team. A referral for an assistive technology evaluation is appropriate at this time.
- ☐ The student is unable to complete tasks independently. The following assistive technology devices and/or services are required:
- ☐ Training/technical assistance for the child and/or the family is needed and will be provided at the following levels:
- ☐ Training/technical assistance for other individuals who are substantially involved in the major life functions of the child will be provided.