INDIVIDUALIZATION OF SCHEDULE

Individual's Name:	Age:	

	INDIVIDUALIZATION OF THE COMPONENTS		
COMPONENTS	circle and describe		
FORM: The type of visual cue (or combination of visual cues) used on the schedule. Does the individual go to the correct location after referring to the cue?	 written word clip art photo object *indicate if there is a combination (which forms) 		
CUE TO INITIATE: The cue that signals the individual to check/refer to their personal schedule. Does the individual stop what they are doing and transition to schedule (or areas) when given the cue?	 verbal direction written and/or picture: object: schedule cue brought to the individual at the time of each transition *indicate if there is a combination of cues 		
LOCATION: The place (transition area) where the individual will find their schedule. Does the individual locate their own schedule, discriminating it from other individuals' schedules?	 mobile – individual carries the whole schedule throughout the day stationary – individual's personal space (desk/cubby/locker) stationary neutral: near others' schedule stationary neutral: separate and away from others' schedule no transition area: schedule cue brought to individual at the time of each transition 		
LENGTH: The number of activities presented on the schedule at one time. Does the individual follow the correct sequence of the cues?	 full day part day: number of activities shown at one time one schedule cue at a time 		
METHOD TO MANAGE: The way the individual manages (interacts) their schedule at the beginning or end of each transition. Does the individual manage (interact) with their schedule, staying on track as they progress through the schedule?	 mark off – (before or after): indicate which turn over carry and match carry and use 		
Can the individual's interests be incorporated into the schedule and if yes, how?			