# Assistive Technology Planning Guide / Extended Assessment Plan

### <u>SETT - Student, Environment, Task, Tools</u>

Student Name:		
School:		
Parent Name(s):	Parent Phone:	
Teacher Name:	Teacher Phone:	
Casemanager:	CM Phone:	

**Part 1 – Date of Assessment Planning:** 

Part 2 - Date of Team Review:

#### PART 1 - ASSESSMENT PLANNING - Date:

**Team Members Present:** 

#### **STUDENT – Abilities and Difficulties Related to Identified Tasks:**

Tasks:	Abilities:	Difficulties:
Medical	•	•
Fine Motor	•	•
Written Communication	•	•
Verbal Communication	•	•
Reading	•	•
Math	•	•
Computer Skills	•	•
Vision	•	•
Hearing	•	•
Cognition	•	•
Behavior	•	•
Attention	•	•
Other	•	•

#### **ENVIRONMENTAL CONSIDERATIONS**

#### -What Is Current Environment Like?

Place/Item:	Description (Including Concerns)
Classroom Setup:	•
Access to Technology:	•
Home:	•

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#### -What Has Been Done In The Past To Meet Assistive Technology Needs?

Equipment or Modification	Used where?	Used when?	Currently in use?	If discontinued, why?

#### TASKS -What Does The Student Need To Be Able To Do?

Task Area:	Task Identification:	
1.		
2.		

### **TOOLS -What Specific Devices and Services May Help the Student Accomplish These Tasks?**

Task:	Proposed Tools/ Strategies	Accepted/Rejected
1.	•	•
2.	•	•

#### **IMPLEMENTATION PLAN**

Device/Service /Strategy	Initial Trial (date)	Length of Trial	Is Training Needed?	Who Will Provide Training & Who Will Receive It?	Who will take data?

#### **OVERALL GOAL FOR ASSISTIVE TECHNOLOGY USE**

	Goal for extended trials:
	How will we know if the trial is successful?:
	What level of achievement is reasonable to expect during the trial period?:
1	How will we know if the trial is not working? (What criteria will we use to
1	stop?):

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#### PART 2 - ASSESSMENT PLANNING - Date:

**Team Members Present:** 

## **Extended Assessment Summary of Devices/Services**(to be completed at end of assessment)

How did the student's performance change when using the devices/services?

How did the student like using the devices/services?

What are the advantages of using the devices/services?

How long can a student be expected to use the devices/services?

**Extended Assessment Recommendation:** 

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