



Application Form Part 3 Form for Staff Use

This is Part 3 of 3 of your application to the Delta Life Skills Society Summer Fun Program. Please complete all of the documents attached and bring with you to the Annual General Meeting. **Attendance at the AGM is mandatory.**

Participant's Name: _____

Child's Diagnosis: _____

T-Shirt Size (Please indicate):

Adult Youth S M L XL

Describe how your child communicates:

If your child has an adaptive communicative device, what is it, how do they use it, and will it be sent to Summer Fun?

Behaviours

1. Does your child ever require more than 1:1 care for their behaviour? Yes No

If so, how often and under what circumstances?

2. Does your child have a safety plan at school? Yes No
If so, please include a copy



Behaviours Continued

3. Does your child work with a Behavioural Therapist?

Yes No

4. Does your child have any history of aggression?

Yes No

If so, please elaborate:

5. Has your child ever required more than 1:1 support?

Yes No

If so, describe circumstances where this happens:

6. List strategies used to mitigate behaviours:

7. Does your child run away?

Yes No

If so, under what circumstances?:

8. Reaction to Strangers / Crowds / Loud Environments:



Behaviours Continued

9. Fears?

10. Describe any unusual routines your child has:

Life Skills and Personality Traits

Traffic Awareness Yes No

Water Safety (i.e. swimming) Swims independently Needs life jacket/floaties
 Cannot swim

Does your child have a support dog? Yes No

Is your child afraid of dogs? Yes No

Toileting

Independent Needs some assistance Needs complete support

Please explain what your child's bathroom routine might involve (ex. Prompting, daily schedule, etc.):

Describe what toileting looks like for your child. An example of independent toileting would be a child who can go into a washroom stall on their own, wipe independently, pull up and down their pants without help, and can clean themselves appropriately after a bowel movement without assistance from anyone else. Please be as specific as possible so we can help your child in the most supportive way, especially in public.





Life Skills and Personality Traits Continued

Dressing

Independent Needs some assistance Needs complete support

Eating

Independent Needs some assistance Needs complete support

Does your child need helpful prompts/strategies/favorites (ex. first and then, use assertive tone, etc) for life skills, please describe:

How will your child arrive and leave our program?

Describe your child's personality:

List one preferred activity and one activity your child does not like:

Preferred/Favourite:

Non Preferred/Dislike:

Is there anything else you'd like to tell us about your child?



Life Skills and Personality Traits Continued

Which **one** main life skills goal do you want your child to work on this summer?
(If you would like more information on life skills goals, please refer to the section on
“Setting Goals and Strategies” in the Parent Handbook.)

- Money skills
- Meal preparation and clean up/domestic type skills
- Using public transit
- Social skills – interpersonal skills and friendship

Describe what you want this to look like for your child:

For example, if you selected money; indicate whether your child can count money, do they pay for items at stores regularly, are they only able to recognize the value of coins/bills? For transit; describe if your child can read timetables/schedules, if your child is independent in using their compass card or plan trips. For cooking; can your child use the oven, cut/spread with a knife, measure and mix? Does your child need supervision in the kitchen? For domestic skills; Can your child fold clothes? Can they set the table? Can they wash dishes?

What **two** secondary life skills goals do you wish your child to work on?

- Street safety/stranger danger
- Turn taking
- Personal hygiene
- Behaviour management/communication
- Time management

Describe how this would look for your child:





Consent and Acknowledgments

I/We hereby give Delta Life Skills Society my/our full consent and permission to allow my/our child to participate in any and all supervised field trips or outings of any nature or kind during the period that my/our child is under the care of Delta Life Skills Society.

As members of Delta Life Skill Society, I/we agree to support and participate in the minimum fundraising efforts initiated by the Board of Directors, otherwise, I/we agree that additional fees will apply.

I/We believe that I/we have given as accurate a profile of my child as possible and have disclosed all pertinent information that could affect my/our child's experience at Summer Fun. If I/we have failed to disclose any information that could affect the staff, other children, or my/our child, it is understood that this lack of information could result in my/our child being suspended from the program at the sole discretion of Delta Life Skills Society.

Date: _____

Signature: _____

Name: _____

By signing this form, I am in agreement with the previously stated terms and conditions contained within this application and agreement (which includes by reference, all of those terms and conditions set forth in the attached schedule).

Please ensure you have reviewed the Parent Handbook. INITIALS: _____

