



DAILY REPORT

Name: _____ Date: _____

8:00 - 8:45 **BREAKFAST/ MORNING ROUTINE/ ADL**

Arrival

_____ I arrived on time _____ I greeted others
_____ I followed instructions / directions
_____ I asked for help appropriately
_____ Other: _____

Breakfast

_____ I waited in line _____ I requested food
I ate _____ well _____ some/little _____ nothing
_____ Other: _____

ADL

_____ I hung up my things _____ took out notebook/homework
_____ I sat at my desk _____ I followed instructions/directions
_____ I waited appropriately _____ I took turns
_____ Other: _____

8:45– 9:30 **Get Ready To Learn**

_____ I followed my teachers' instructions/directions
_____ I participated in activities _____ I completed exercises
_____ I waited my turn
_____ Other: _____

9:30 – 10:15 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____

10:15- 11:00 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____
I read/listened to (Title) _____
(Author) : _____

11:00-11:45 **LUNCH / RECESS**

_____ I waited in line _____ I made food choices _____ Used good manners
_____ cleaned up _____ I ate _____ well _____ some _____ nothing
_____ I played cooperatively with my friends

11:45 – 12:30 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____
_____ Other: _____

12:30 – 1:15 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____
_____ Other: _____

1:15 – 2:00 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____
_____ Other: _____

2:00 – 2:50 **SUBJECT:**

_____ I followed directions/instructions _____ completed my work
I am working on: _____
_____ Other: _____

(OVER)

Teacher: _____ **Paras** _____

*** CHANGING/ BATHROOM TIMES/ NOTES**

_____ A.M. _____ P.M.

NOTES :

ADDITIONAL TEACHER COMENTS / REMINDERS :



**HOME TO SCHOOL NOTE
Partnership in Learning
Arrival Home**

(Parent / Student to fill out and return the next day to teacher)

___ I arrived on time ___ I greeted my family ___ Other: _____

General Mood : ___ Happy ___ Upset ___ Frustrated ___ Tired ___ Up and Down
___ Other: _____

P.M. ACTIVITIES AND ROUTINES

___ I followed my routine/ schedule ___ I played appropriately ___ appropriate family time
___ completed my homework ___ enjoyed a book ___ watched t.v. ___ used computer ___ ate
my dinner ___ cleaned up ___ I brushed my teeth ___ I took a bath/shower

___ Other : _____

A.M. ACTIVITIES AND ROUTINES

I slept well _____ I did not sleep well _____ Other _____

___ I ate breakfast ___ well ___ some ___ none

___ I brushed my teeth ___ I was changed / used the toilet ___ packed my bookbag with
communication notes and homework.

___ I am coming to school with _____

PARENT NOTES / COMMENTS: