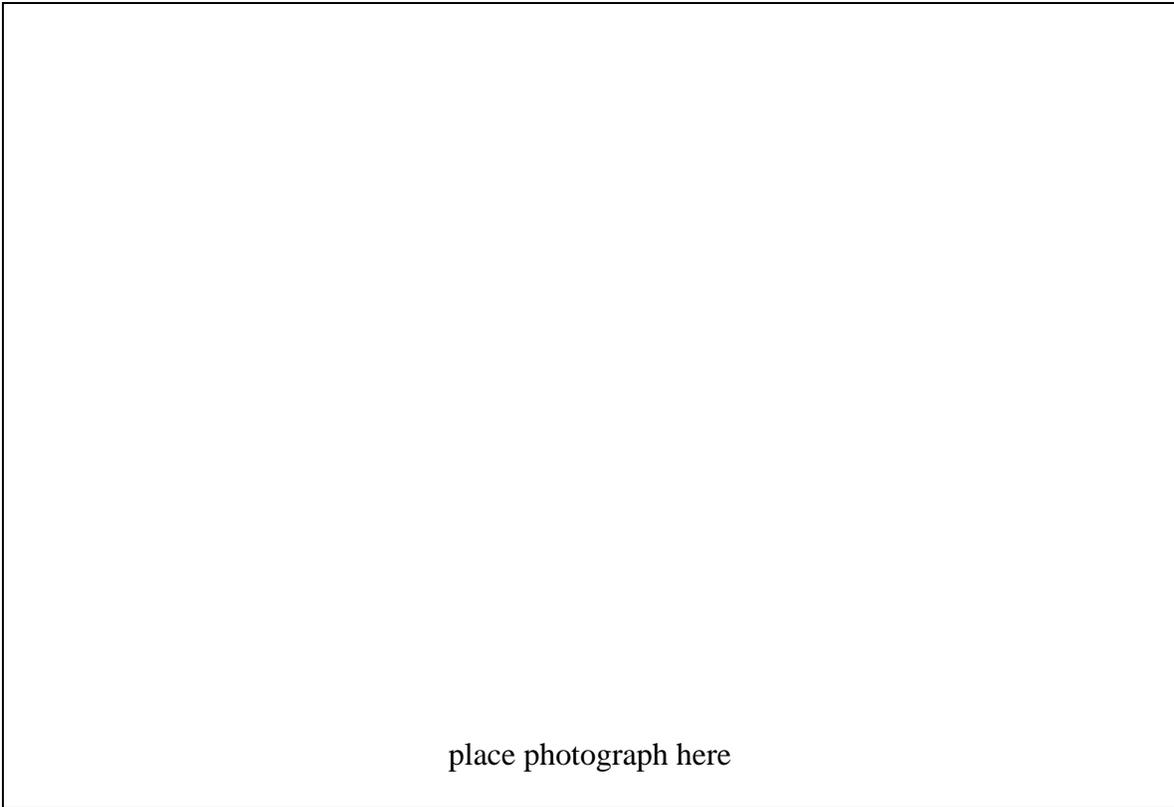


Some Things to Know About Me!



An Introduction for My Respite Worker

Date Written: _____

By: _____

Some Basic Information...

My Name:	
Age:	
Date of Birth:	
Health Card Number (If Needed):	
Street Address:	
City of Residence:	
Postal Code:	
Telephone Number:	
Parent(s) Names:	
Addresses (If Different from Above):	
Parental Custody Arrangements:	
Emergency Contacts (Please List):	
NAME	PHONE NUMBER:
Other Members of the Family You May Meet...	
NAME	AGE:

Things That I Like...

To Do!
To Eat!
To See!
To Hear!
To Feel or Touch!

Things That I Do NOT Like...

To Do!
To Eat!
To See!
To Hear!
To Feel or Touch!
Types of Places/Settings:

I Communicate With Other People by...

--

You Can Help Me Communicate by...

--

I Deal with the Following Health or Medical Conditions...

--

You Can Help Me With These By...

--

I Might Be in Pain or Discomfort If You See Me...

--

I Can Become Anxious or Upset When...

--

Some of my Behavioural Challenges Include...

--

These Tend to Happen When...

--

The Best Way to Deal with Them Is To...

--

My Big Goals for the Coming Year Are...

--

You Can Help Me With These Goals by...

--

Not Negotiable.....

Other.....