

Project TTAP: Technology Team Assessment Process

Parent Telephone Interview

Use this form in conjunction with the Background Information form. Have both in front of you during the telephone interview.

Date _____ Phone Number (____) _____ – _____

Name of parent/guardian contacted: _____
first, last

Parents' Address: _____
street, city, state, zip

Name of child being assessed: _____ ID# _____
first, last

Person conducting interview: _____

Clarify any questions concerning:

Relevant Medical Data

Reason for Assessment

example: improve opportunities for child to develop communication skills

Child's Behavior

example: attention span, motivation, etc.

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Child's Physical and Functional Abilities

example: resting position, prefers right or left side

Child's Communication Abilities

example: verbalizing, head nodding, sign

Seating and Positioning

example: type of seating device child uses, child's resting position

Previous Experience With Devices

example: battery operated toys, computer, adaptive devices

Other Questions to Ask Parent

example: Does the child have access to a computer at school or at home?