

## School to Home Communication Log

Student: \_\_\_\_\_

Date: \_\_\_\_\_

Skills Addressed Today	Mastered	In Progress	Practice these skills at home:
<b>Manding (Requesting):</b> _____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	Please practice having your child ask for these things at home.
<b>Visual Perceptual/Match to Sample:</b>  			Mastered # of block designs: _____
<b>Imitation:</b>  			Imitation targets: _____
<b>Tacting (Labeling):</b>  			Tacting targets: _____
<b>Peer to Peer Manding:</b>  			_____ _____
<b>Listener Responding:</b>  			Listener Responding targets: _____ _____
<b>Other (OT/PT, SLP, etc.)</b>  			_____ _____  N/A

Your child's behavior was \_\_\_\_\_ within expectations \_\_\_\_\_ not within expectations

DESCRIBE \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TOMORROW**

Activities/Specials: \_\_\_ Gym \_\_\_ Art \_\_\_ Music \_\_\_ Library \_\_\_ Speech \_\_\_ OT/PT \_\_\_ Assembly \_\_\_ Other (Please list):

\_\_\_\_\_

## Home/School Communication Log

Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

### Last Night:

Did your child participate in any activities you'd like to share (eg, community, church, family, sports)?

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### This Morning:

Did your child have difficulty sleeping or waking? \_\_\_\_\_yes\_\_\_\_\_no

Comment: \_\_\_\_\_

Did your child eat this morning? \_\_\_\_\_yes\_\_\_\_\_no

Comment: \_\_\_\_\_

Does your child have any medical/physical concerns you'd like to share? \_\_\_\_\_yes\_\_\_\_\_no

Comment: \_\_\_\_\_

Were there any changes in your child's daily routine (eg, change in child care)? \_\_\_ Yes \_\_\_ No

If so, please describe:

Are there any upcoming changes in your child's routine (eg, doctor appointment, family visit, change in parent work schedule):

If so, please describe:

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***Please remember to contact the teacher directly if you have information that needs to be shared immediately***