

**SUMMARY INFORMATION FROM EARLY INTERVENTION AT AGE THREE**

CHILD'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

SERVICE PROVIDER: \_\_\_\_\_ PROVIDER ROLE: \_\_\_\_\_

1. For the area in which you service this child, please describe his/her **current level of functioning**. In observable terms, describe his/her current functioning, what he/she is able to do, etc. Include information regarding the child's **strengths and area's of need**.
2. Please describe your **current service delivery** for this child (sessions per weeks/minutes per session).
3. Please describe the focus of your **current goals** for this child.
4. Please describe the **methodologies and strategies** that you are currently using and finding effective with this child.
5. Please describe **accommodations** that you are currently implementing when working with this child (Accommodations are changes in the way things are done in order to provide the child with an equal opportunity to participate).