

SOCIAL SKILLS SURVEY - TEACHER

Student's Name: _____ Age: _____

Teacher completing form: _____ Date: _____

School: _____ Grade: _____

How long teacher has known student: _____

Your student has applied to attend the TRIAD Social Skills camp for children with Autism Spectrum Disorders. Including typically developing peers is a vital aspect of our camp. These children model appropriate behaviors for our campers, serve as helpers to our counselors, and they provide the opportunity for our campers to learn and practice appropriate social interaction skills, and ideally, establish friendships with them. We would like your input regarding this student and his/her ability to fulfill this important role at camp. We appreciate your taking the time to complete this survey.

1) How much interest in interacting with classmates does this student show?

1	2	3	4	5
Very little interest				Very much interest

2) How much interest in helping others does this student show?

1	2	3	4	5
As little as possible				As much as possible

3) How well does this student interact with classmates?

1	2	3	4	5
Not Very well				Very well

4) How many friends in the classroom does this student have? _____

5) Does this student ever have the opportunity to interact with any students with special needs? If so, are these interactions appropriate?

6) Is this student responsive to adult instruction and show appropriate classroom behavior? _____

7) Please list any special interests, skills, talents, or areas of expertise that this student has demonstrated:

8) Would you recommend this student to be a peer at our camp? Why or why not?

THANK YOU!!