

Date _____
Completed By _____

Get to Know Me

Hello, my name is _____.

I have an appointment with you. I am not so sure about this appointment, but you can help me feel more comfortable at your office by knowing some things about me.

My exceptionality is _____.

INTERESTS

(My favorite movies, hobbies, toys, themes, sports, topics, music, colors, etc.)

COMMUNICATION

Speaking:

- ___ I talk a lot and sometimes it is hard for me to stop
- ___ I am good at talking and carrying on a conversation
- ___ I don't talk much. Conversation is hard, but I like to be part of the conversation.
- ___ I don't talk much. It would be better if you just talk to _____.
- ___ I talk using pictures and gestures
- ___ I talk using a little computer (voice out-put device)

Other: _____

Listening:

- ___ I am a good listener. I can understand what is being said.

___ I may not look like I am listening, but I hear and understand what you say.

___ Listening is hard. It might be better if you talk to _____.

Other: _____

SENSORY

___ I do not have any sensory issues.

___ I have some sensory issues, but I will be fine during the appointment.

___ I have sensory issues that may make the appointment hard for me, such as: ___ What I Hear/Auditory

___ What I Smell/Olfactory ___ What I See/Visual

___ Touch/Being Touched/Tactile ___ Taste or Feelings/Mouth/Oral

Other: _____

TIME & TIMING

- ___ I can wait for my appointment in the waiting room
- ___ It would be best if I could wait in a clinic room
- ___ I will do best if the appointment moves quickly
- ___ I do not do well when I feel rushed
- ___ I will need little breaks during the exam

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Other: _____

HELPFUL HINTS

It would be helpful if you could.....

1. _____

2. _____

3. _____

Please Don't.....

1. _____

2. _____

3. _____

**Thanks for taking the time to get to know me before
the appointment. See you soon. 😊**