

Community Domain Inventory

Name _____ Date _____

This form will be used by members of your child's educational team to develop an appropriate community based instructional program. As part of this team, you as a parent can help by providing this valuable information. Please return this form to your child's classroom teacher as soon as possible.

1. Please let us know where your child goes in the community and with whom. please be specific on the names and locations of the places. Use back of form if needed.

With Whom: I =independently P=Parents F=Family Members
Fr=Friends R=Respite or Sitter

Restaurants:

Name	Location	With Whom
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Recreation and Leisure (Sports,school events,fairs,swimming libraries,concerts,etc....)

Name	Location	With Whom
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Grocery Stores

Name

Location

With Whom

Clothing and Department Stores

Name

Location

With Whom

2. Is there a particular bank which your family uses? (Please specify)

3. What places would you like your child to go?

4. What type of transportation does your child use?

5. When in these places, does your child pay for items and/or services by himself/herself?

6. When in a restaurant, does your child order for himself/herself?

7. When in a store, does your child ask questions of the people who work there?