# Functional Skills Informal Assessment

**Student:** _____ **date completed:** _____

| | skill | completes independently | completes with some level of help |
|---|---|---|---|
| entering school skills | | | |
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| | | | |
| navigate classroom | | | |
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| problem solve in classroom | | | |
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# Functional Skills Informal Assessment

**Student:** _____ **date completed:** _____

| | skill | completes independently | completes with some level of help |
|---|---|---|---|
| lunch/recess | | | |
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| | | | |
| | | | |
| bathroom/self care | | | |
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| leaving school | | | |
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