MAKOR COLLEGE EXPERIENCE SKILLS ASSESSMENT FORM
To be completed by Parent or Guardian

Name of applicant _____ DOB _____

Name of respondent(s) _____ Relationship _____

Please provide the following information so we can be sure that the applicant is appropriate and can succeed in the program:

Indicate how independent the applicant is in the following areas:

Circle the appropriate response (I= Independent; S= Needs supervision; A= Needs assistance; D= Dependent on others)

Dressing	I	S	A	D
Bathing	I	S	A	D
Toothbrushing	I	S	A	D
Toileting	I	S	A	D
Doing laundry	I	S	A	D
Preparing meals that do not require cooking	I	S	A	D
Preparing meals that require simple cooking	I	S	A	D
Walking around the community	I	S	A	D
Taking medication as needed	I	S	A	D
Using public transportation	I	S	A	D
Getting along with others	I	S	A	D
Shopping	I	S	A	D
Budgeting	I	S	A	D

Do you believe the applicant is eager to and able to learn in a classroom setting?   ' Yes   ' No

Do you believe the applicant will be able to maneuver around campus independently?   ' Yes   ' No

During his most recent educational experience, did the applicant require a formal plan to
address challenging behaviors?   ' Yes   ' No

Has the applicant ever received medication to address challenging behaviors or a mood disorder?   ' Yes   ' No

Is the applicant currently receiving medication to address challenging behaviors or a mood disorder?   ' Yes   ' No

Does the applicant ever stay home without supervision?   ' Yes   ' No

Does the applicant ever go out without supervision?   ' Yes   ' No

For New York State Residents: Is the applicant approved for Day Hab services through the
New York State Of ce for People with Developmental Disabilities?   ' Yes   ' No

What is the applicant's formal diagnosis? _____

_____

_____

_____

_____

_____

_____

_____

Is there anything else you feel we should know that might affect the applicant's successful completion of the program?

_____

_____

_____

_____

_____

_____

_____

Acceptance into the Makor Dorm is separate and not necessarily guaranteed by acceptance into the Makor College Experience Day Program. Are you seeking a spot in the dorm or does your son intend to commute to the program?

Check one (Note: Transportation is not provided)

' Intend to dorm   ' Intend to commute

Please submit this form with the completed application and requested documentation.

THANK YOU