

# SOCIAL THINKING FORM

Thank you for your interest in Sharon E. Sokolik and Associates. We strive to provide the best services to meet your child's individual needs. Please complete this form and return it to your therapist.

Social Thinking Concerns	Date:	
Child's Full Name and Nickname:		
Date of Birth:		
Address:		
Special Interests:		
Grade/ School Name:		
Physician:		
Any diagnosis? Please list:		
Any special services? Please list:		
Parent 1 Name:		
Address		
Home/Cell:		
email:		
Parent 2 Name:		
Home/Cell:		
email:		
Siblings? name/age/special needs:		
Allergies/diet restrictions?		

#### **Description of Abilities**

Please describe your child's current level of social functioning. (Comment on cooperative play, friendships, nonverbal language etc.)

## Parent Checklist

Based on your observations in various situations, rate your child's use of the following skills.

My child uses this skill	Sometimes	Always	Never		Sometimes	Always	Never
Listens when you or others talk to them				Plays common pretend games			
Uses body language to communicate				Plays made up games			
nterprets body language				Initiates greetings			
Jses facial expression to communicate				Responds to greetings			
nterprets facial expression				Introduces self to others			
Uses inflection to communicate				Introduces other people			
nterprets inflection				Engages in small talk			
Jses tone of voice to communicate				Initiates conversation			
nterprets tone of voice				Shares related events stories			
Touches appropriately				Keeps conversation going			
Stands appropriate distance from people				Ends conversation appropriately			
Uses appropriate eye contact				Stays on topic			
Uses appropriate voice volume				Changes the subject			
Visually references others for approval				Allows others turns in conversation			
Joins a structured game				Asks others questions about topic of conversation			
loins dramatic play				Gives compliments			
Accepts ideas during play				Imitates peers			
Gives ideas during play				Comforts others			
nitiates play				Reacts appropriately to others' emotions			
Fakes turn without prompting				Shows assertion when appropriate			
Offers to share with others				Ends fights (make up)			
Solves conflicts without an adult				Says "I'm sorry"			
Allows others to go first				Accepts apologies			
Plays by the rules				Acts appropriately meeting a new person			
Ok with timed tasks/activities				Inquires about a new friends			
Nins like a good sport				Talks on the telephone			
Plays common board games				Calls peers on the telephone			
Fells jokes				Encourages others			
listens/reacts to jokes				Shows interests in fads			
_aughs appropriately				Deals with teasing			
Asks for help				Sticks up for friends			
Offers help				Expresses anger appropriately			
Accepts help				Shows respect to adults			
Show preferences to certain peers				Interprets a situations (make inferences)			
Can describe friends' good qualities				Takes another's perspective			
Prefers to play with adults rather than peers				Makes predictions about others' reactions			

## **Priority Skills**

Please list at least 5 skills you consider your highest priority (i.e. Perspective taking, maintaining eye contact, interacting with peers, sharing, problem solving, managing emotions, personal space, flexible thinking, etc.)

1.	4.
2.	5.
3.	

#### **Additional Information**

Please share any other information you would like us to know: