



Technical Assistance Request Form

Date: _____

Name of person requesting TA: _____

Agency: _____ Gender: _____

Address: _____ Daytime Phone #: _____

Email: _____

Name of Child in Need of TA: _____ Gender: _____

Date of Birth: _____ Address: _____

Your Position (parent, teacher, psychologist, OT, PT, nurse): _____

Type of TA requesting:

- | | | |
|--|---|--|
| <input type="checkbox"/> Information/materials | <input type="checkbox"/> Instructional Strategies | <input type="checkbox"/> In-service/training |
| <input type="checkbox"/> Home Visit | <input type="checkbox"/> School Observation/visit | <input type="checkbox"/> Equipment Use/ideas |
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Family/Care-Giver issues | <input type="checkbox"/> Phone Contact |

What topics would you like addressed?

- Auditory Training/Listening Skills
- Orientation and Mobility Skills (travel independence)
- Assessment Information and/or Referral (if form is printed and mailed, please circle area; vision, hearing, communication, development or other)
- Organizing a Daily Routine (sequence of activities, transition from one activity to another)
- Behavior Management/Social Emotional Concerns (relationship with others)
- Parent to Parent Contact
- Communication System Development
- Recreation and Leisure Skills
- Resources: Information and/or Referral

- Daily Living Skills (personal care and self-help skills such as toileting, dressing, etc.)
- Home or Classroom Observation/Recommendations
- Vocational Training
- Sensory Skills Development (vision, hearing, tactile skill use)
- Inclusion into School Program (techniques that support the child's learning in the regular classroom)
- Transition (early childhood to school or school to adult services)
- Literacy Mode Determination (use of Braille, large print, etc.)
- Medical Issues (gaining more information about a child's diagnosis)
- Other (specify): _____

Print out a hardcopy of this form, fill it out, and mail to:

Sherri Nelson
PO Box 5036
1510 12th Ave. N.
Fargo, ND 58105