



Diagonal – Crosses Midline – Comments:
<i>Gaze Shift:</i>
<i>Visual Scanning:</i>
<i>Where does individual hold an object to look at it?</i>
<i>Other Observation Trials related to Functional Vision during Mealtimes or very motivating activity (auditory or other cues eliminated as possible):</i> Awareness: Reach toward object: Size: Contrast: Color: Lighting: Movement: Distance: Location: Other:
<i>Other Functional Activity Observations:</i>
<i>Other Functional Activity Trials:</i>
<b>Evaluation Summary:</b> <i>Visual Strengths:</i> <i>Visual Challenges:</i>
<b>General Recommendations</b> ( include approach, lighting, materials size, color, contrast, shininess, placement, simplification, movement - as applicable) •
<b>General Orientation/Mobility Recommendations</b> •
<b>Environmental Modifications Recommendations</b> •
<b>Related Assistive Technology Recommendations</b> •

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 Evaluator’s Signature

Date:

*Distribution:*