

Daily Communication Log

Student Name:

Date:

Medical/Hygiene Information:

Lunch: ___ Bought at school ___ From home

Skills worked on today:

___ Academic Skills ___ Life Skills ___ Recreation/Leisure Skills

___ Community Skills ___ Vocational Skills ___ Social Skills

Notes regarding skills:

Behavioral Issues: ___ None ___ Exhibited Issues (see below)

Additional Information (Teacher or Parent):

Please send the following to school:

Signature of staff:

Today's date: