Student name: Click or tap here to enter text.

Child Associate name: Click or tap here to enter text.

School name: Click or tap here to enter text.

Date: Click or tap here to enter text. Session #: Click or tap here to enter text.

Length of time (in minutes): Click or tap here to enter text.

**This session was:** [ ] **In person or** [ ] **virtual** (check one)

**During the earlier portion of the session, the child** (check all that apply):

[ ] Showed enthusiasm

[ ] Showed assertiveness

[ ] Seemed frustrated

[ ] Appeared hesitant

[ ] Expressed feelings openly

[ ] Talked a lot

[ ] Asked CA to play

[ ] Showed decision making ability

[ ] Played aggressively

[ ] Behaved aggressively toward CA

[ ] Appeared pleased

[ ] Remained quiet

**During the later portion of the session, the child** (check all that apply):

[ ] Showed enthusiasm

[ ] Showed assertiveness

[ ] Seemed frustrated

[ ] Appeared hesitant

[ ] Expressed feelings openly

[ ] Talked a lot

[ ] Asked CA to play

[ ] Showed decision making ability

[ ] Played aggressively

[ ] Behaved aggressively toward CA

[ ] Appeared pleased

[ ] Remained quiet

**At the end of the session** (check all that apply):

[ ] Child continued to play

[ ] Child expressed desire to stay longer

[ ] Limits were necessary to end the session

[ ] Child left easily

**During the session, which child-led skills were used?**

[ ] Attending skills (eye contact, open posture, listening)

[ ] Reflecting content of play

[ ] Reflecting feelings

[ ] Reflecting on the relationship

[ ] Reflecting behavior(s) observed

[ ] Returning responsibility to the child

[ ] Encouragement (crediting the child’s effort)

[ ] Limit setting

**How effective was today’s session? Check your choice:**

Not at all effective Very effective

 1[ ]  2[ ]  3[ ]  4[ ]  5[ ]

**Other session observations:**

1. Key activities the child engaged in, please describe:

Click or tap here to enter text.

1. “Firsts” that occurred (i.e. first time limits needed to be set, first time child didn’t ask for my help in making a decision, first time child invited me to join in play)

Click or tap here to enter text.

1. What went particularly well during this session?

Click or tap here to enter text.

1. What was particularly challenging about this session?

Click or tap here to enter text.

1. Is follow up needed? Yes [ ]  No[ ]

If yes, describe:

Click or tap here to enter text.