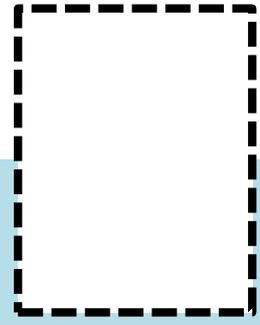


My Communication Profile



My name is:

How I share information

How I take in information

How to best support my communication?

Things I enjoy

Things that may interfere with my communication

My Care Needs

How I move around:

How I eat and drink:

How I use the bathroom:

How I take medication:

Other important things about me: