

CHILD'S PROFILE
IMAGINE MINISTRIES
CLOVERDALE BAPTIST CHURCH

Please Print Clearly

Child's Name _____ Age _____
 first middle last

Parents/Guardians _____

Address _____ City _____

Postal Code _____ E-mail address _____

Child's birthday _____
 month day year

STRENGTHS AND SKILLS

example: likes to draw
 loves adult attention

INTERESTS

BACKGROUND INFORMATION

Diagnosis

Other

TRIGGERS/ANTECEDENTS

FUNCTION OF THE BEHAVIOUR

STRATEGIES FOR US TO IMPLEMENT