Functional Vision Assessment Checklist Summary

Date: _____ Student's Name: _____

Age: _____ Grade: _____ School/Placement:_____

Teacher of the visually impaired: _____
Reason for assessment: ☐ New referral ☐ Triennial review ☐ Request Other: _____

Nature/Extent of Visual Impairment

Diagnosis: _____ Prognosis (Stability): _____
Acuity (Best corrected, each eye): Near: _____ Distance: _____
Preferred eye: ☐ Right ☐ Left Student is or is not binocular: _____
Field of view: _____ Preferred posture for viewing (if any): _____
Sensitivity to light/glare: _____ Intervention (e.g., visor, glasses, or seating): _____
Other: _____
Describe current prescription and indicated use (glasses, bifocals, and so forth): _____
_____

Educational implications of eye condition: _____
_____

General Learning Abilities (Present levels of educational functioning): _____
_____
_____

Presence of Additional Disabilities

Describe: _____
Implications: _____

Access to Instructional Materials – Physical Characteristics

1. Attends to objects (Indicate size/distance): _____
2. Identifies object(s) (Indicate size/distance): _____
3. Identifies shapes (Pictured): _____ (Indicate size/distance): _____
4. Identifies pictures
   (Outline of single item): _____ (Pictured action/activity): _____
   (Indicate size/distance): _____
5. Size of print (Letters/Numbers): _____
   (Additional low vision aid): _____
   (Reading distance and posture): _____
6. Quality of print or picture (Indicate what is seen efficiently compared with what requires time or effort or both.)
   Clarity needed: ☐ Sharp image ☐ Distinct edges ☐ Boldfaced type Other: _____

   Can see: ☐ Photocopy ☐ Ditto Other: _____

   Contrast: ☐ Dark ☐ Faded ☐ Light Other: _____

   Color of print: _____Color of paper: _____

   Observations/Comments: _____

7. Print style or font (Indicate what can be seen.)
   ☐ Bold ☐ Thin ☐ Underlined ☐ Italics Other: _____
   ☐ Serif ☐ Sans serif Other: _____

8. Print spacing (Indicate spacing preference for numbers and letters, words, or lines.)

_____
_____

9. Ability to see and use printed materials in standard format (Check and identify.)

Single shape or object (solid or outline): _____
Pictures: _____
Textbooks: _____
Tests: _____ References (e.g., dictionary): _____
Measurement tools: _____ Calculator: _____
Pictorial: Drawings: _____ Diagrams: _____
Computer screen: _____ Maps: _____
Other: _____
_____

Access to Instruction

1. Instructional Formats That Can Be Seen (Check and identify.)

Demonstration or explanation of objects: _____
Explanation of pictured/printed work sheet: _____
Overhead: _____ Colors: _____ Video: _____
Chalk: _____ Colors: _____ Dry-Erase board: _____ Colors: _____
Bulletin board: _____ Maps: _____ Charts: _____ Pocket charts: _____
Other: _____
_____

2. Written Work (Check and identify where applicable.)

Legibility: To student: _____ To teacher: _____ To others: _____
Writes on line: _____ Paper used: ☐ Blue lined ☐ Black lined
Uses: ☐ Crayon ☐ Regular pencil ☐ Dark pencil Other: _____
Working distance: _____ Posture: _____
Observations/Comments: _____
_____

3. Vision-Related Behavior(s)

Searches to localize designated objects: _____
Searches to localize a designated place (i.e., finds where to begin; locates a specific section or item):

_____
Scanning: Looks material over thoroughly: _____ Determines format: _____ Uses finger: _____
Maintains place to copy: At desk: _____ From the board: _____
Is able to follow: Teacher's presentation: _____ As another student reads: _____

Sustains attention with: _____ Without: _____ Apparent fatigue for (subject, time): _____
Efficiently locates materials: _____
Observations/Comments: _____
_____

Social/Emotional Factors (Self-esteem, adjustment/acceptance)

1. Indicates vision-related needs: _____
2. Indicates needs for assistance: _____
3. Describes nature/extent of visual impairment: _____
4. Uses specialized materials or equipment as needed: _____
5. Other: _____
_____

Suggested Recommendations (Example of alternative learning media or interventions or both that reflect vision-related needs resulting from data indicated above)

1. Instructional Modifications (Indicate near and distance.)

Student is given an item or print copy or both during oral explanation: _____
Surface angle (For example, a reading stand): _____
Student moves (Name activity.): _____
Positioning of material: _____
Adjusted time (Amount and activity): _____
Adjusted length (Amount and activity): _____
Copying: Near: _____ Distance: _____ NCR paper: _____
Prompts for attention: Visual: _____ Auditory: _____ Tactual: _____
Other: _____
_____

2. Adaptations of Materials (Indicate what type and when needed.)

Size: _____
Darken: _____ Raised line: _____ Braille: _____
Aural media: _____
Other: _____
_____

3. Specialized Materials and Equipment

Large print (Indicate size/activity.): _____
Magnifier (Diopter/Power, activity): _____ Monocular (Power, activity): _____
CCTV (Size necessary): _____
Voiced equipment: _____ Voiced software: _____
Other: _____
_____