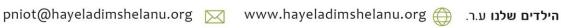


Registration (Intake)

Personal Information												
Name:			IC	D Telephoi			ne: Tel. at ho				Age:	
Mail:	ail: Pl			Place of study:	Place of study:				Da	te of birth:		
Num. siblings	-	ner position in		Age of the	Age of th	ie	Num. of mar	rried	Fill	ing date:		
	the family			youngest eldest siblings				=	Ma	rried Parent	ts: 🗆 Yes 🗀 No	
Address: WHO					Leumit 🗆	Macc	abi 🗆 Klalit 🗀 M	euhedet 🛮 No	one I	Extra Insurance/	other:	
About the father:												
About the mo	other:											
About the siblings:												
How did you	hear ab	out us	:									
Background (How was it in the past)												
What bothers you the most/you want to improve today												
Development												
☐ Complicated childbirth Specify:												
☐ Delayed development Specify:			cify:	r:								
Age of first words: First sentences: Specify:												
Received paramedical treatments such as: physiotherapy, hydrotherapy, occupational therapy/speech therapy, etc.												
Specify:												
☐ Medical pr	oblems	in the	past	/present Spec	cify:							
Food sensitiv	ities: 🗆	Milk [] Wh	nite sugar 🏻 An	y sugar 🗖	Flou	r 🗆 Other:					
Light/Sound/	Touch S	Sensitiv	ity: [☐ Excessive ☐	Low Bedv	vetti	ng: 🗆 Yes 🗖	No 🗆 Som	etin	nes Hours	of sleep:	
How many nu	utritiou	s meals	a da	ву	Specify:						·	
Indicate: (1) Not at all (2) Little (3) Yes (4) A lot					Do	esn't	: like riding a	bike				
Motor clumsi	Motor clumsiness			Dif	ficul	ty falling asle	ер					
Lots of energ	у				Sup	erfi	cial Compreh	nension				
Shallow sleep)				Wa	ıke-ι	ıp struggles					
Forgetful	Forgetful				Pro	Problems with vision / focus						









Registration (Intake)

Medication Dose Be				ation	s raken	(1) No	ne (2) Little (3) Enough (
	Beginning		d He	ps (1-4)	Spoils (1-4))	Notes (Side	Effects	and	Effect	iveness)
Le	arnir	ng are	a (1) Abov	e Average	e (2) Average (3)	Slightly	Below Average (4) Well B	Below Aver	age		
Subject N	Specif	ecify Subject			bject			Specify			
Reading					Gemara,						
Reading comprehension					Pays attention to teacher						
Writing					Organiza						
Spelling					Always b	Always busy while in class					
Language					Motivati						
Crafts					Answers	Answers related to the					
Mathematics					issue						
		So	cial ar	ea (1)	Not at All (2) A	Little (3) Yes (4) A Lot/Very				
Domain	Note	Speci	fy		ľ	Vote	Specify				
Issues with Friends/Teach					Messy						
Friends don't come home											
Issues with body/nonverb			Unable to say no (limi)				
Freezes in social situations			Victim of bullying								
							Difficult Behavi	or			
		Emo	tiona	l area	(1) Not at all	(2) Little	(3) Yes (4) A lot/Very				
	Note	Specify			Domain			No	ote	Spec	ify
Shy							Flexible Mind				
Perfectionist							self-esteem				
Violent						ency to fear					
Hypersensitivity			Depressive								
Social anxiety					Explosive						
Anxiety about the future				Very active							
Anxiety about things, animals, etc.					Finds it difficult to dela						
						gratif	ication				

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