



# ASSISTIVE TECHNOLOGY IMPLEMENTATION PLAN

## STUDENT INFORMATION

Student Name	<b>Brooke B.</b>	Grade	<b>6</b>	Date of Birth	<b>5-23-xxxx</b>
School	<b>Jonah Stark Middle</b>	Date	<b>9-20</b>	AT Plan Review Date	<b>10-30-xxxx</b>

## POINT OF CONTACT (Individual assigned to keep the Implementation Plan updated)

<b>Mr. Edwards, special education teacher and case manager</b>
--

## IMPLEMENTATION TEAM

NAME (List <u>all</u> individuals who will implement the AT with the student.)	ROLE (e.g., administrator, teacher, family member, service provider, student, etc.)
<b>Ms. Adelaide</b>	<b>science teacher</b>
<b>Mr. Jacobson</b>	<b>social studies teacher</b>
<b>Ms. Gillespie</b>	<b>language arts teacher</b>
<b>Mr. Edwards</b>	<b>special education teacher</b>
<b>Mr. &amp; Ms. B</b>	<b>Brooke's parents</b>
<b>Ms. Garcia</b>	<b>AT specialist</b>

## EQUIPMENT

EQUIPMENT & SOFTWARE TO BE USED	STATUS (e.g., owned by school, will purchase, will borrow from district library, etc.)
<b>Bookshare</b>	<b>District has an account; sign Brooke up for membership</b>
<b>Task-management app or program</b>	<b>Several free options are available</b>

## EQUIPMENT TASKS

TASK (e.g., order/procure AT, load software, adapt/customize devices/software, set up at home/school, maintain/repair, etc.)	PERSON(S) RESPONSIBLE	DATE DUE
<b>Sign up for Bookshare membership</b>	<b>Ms. Garcia</b>	<b>10-01-xx</b>
<b>Locate and customize task-management app or program</b>	<b>Ms. Garcia</b>	<b>10-05-xx</b>