

		<h1>Assistive Technology Implementation Plan</h1>	
Student Name:	Date of birth & Age:	School:	Date of Plan:
			Review Date:
Team members:		AT to be implemented:	
<b>Desired outcomes of Implementation:</b>			
What will the student use AT to do:			
Does additional AT need to be acquired / installed:			
What specific skills will the student need to learn to use the AT in a functional manner:			
When and where will initial student training be provided:			
When and where will ongoing student training be provided:			
Does the student require direct supervision to use AT in a functional manner:			
When and where will the student use the AT:			
How will AT be made available in each environment:			
Which adults require training to support the functional use of the AT:			
Procedure for requesting and scheduling maintenance, repair, technical assistance, training:			

Support Task	Person Responsible	Target Date:	Evidence of Completion:	Comments
Initial student training				
Ongoing student training				
Implementation of AT integration into classroom activities				
Monitoring and documentation of student progress towards AT goals				
Staff training				
Ongoing consultation with staff				
Communication of AT use with family				
Family training				
Installation				
Repairs and modifications				
Other				