To help you get to know me, my family and my likes and dislikes better

The BIG Book

All About ME

Hi My Name Is...
I want to introduce myself to you with my “Let Me Introduce Myself to You” booklet. This booklet includes a lot of information about me and my family. I hope that this information will help you get to know me and some of my interests, strengths and skills.

My parents have high expectations for me; just as other parents do for their children. My parents hope that I will follow school rules, perform to the best of my ability and be a contributing member of the group. Quality teaching and positive peer role models will help me be successful.

If you have questions, please contact my parent(s) at one of the following numbers:

- Home: (   ) ____________________
- Work: (   ) ____________________
- Cell: (   ) ____________________

The best time to reach them is ________________________________.

My parents look forward to working with you; please let them know how they can help make this school year a wonderful and productive year.

Sincerely,
Here Is My Family

My name is:_________________________________

I like to be called:____________________________

My birthday is:______________________________

I was born in:________________________________

Adult(s) I live with:
__________________________________________who is my________________________________________
__________________________________________who is my________________________________________
__________________________________________who is my________________________________________
__________________________________________who is my________________________________________

I have _____ brothers.                                I have _____sisters.
Their names are:_________________________________ Their names are:_________________________________

We have _____ pets.
Type of pet:___________________________________
Pet’s name:____________________________________

Other family members and friends that I want you to know about are:
____________________________________________________________________________________
____________________________________________________________________________________

PHOTOS

GO HERE
To begin with, here are some very important things I want you to know about me:

- I am a child with autism.
- My senses pose challenges for me and it may be difficult for me to handle bright lights or loud noises.
- Please do not think that I “choose not to do something” as often it is that I “cannot do” the same thing you want me to do.
- I am very concrete. I do not understand the abstract or sarcasm. I interpret things literally the way they are written or said.
- I may have a very difficult time verbally communicating my wants and needs, or letting you know when something is bothering me. Please listen and watch all the ways that I communicate.
- I am a visual learner; show me how to do something; let me practice; repeat a few times and we will both be less frustrated.
- Please, emphasize and build on what I can do, not what I cannot do.
- Often times I have difficulty playing with other children and choose to be alone; help me with learning to be more social and how to play with others and make friends.
- Sometimes I get very frustrated and act out; watch me and help me identify what triggers my behaviors and teach me ways to handle the situations that cause me stress.
- Please, above all, LOVE ME UNCONDITIONALLY. I am a child, a child with autism.

Adapted from: Ten Things Every Child with Autism Wishes You Know by Ellen Notbohm
MY PARENTS DREAM FOR ME

When I was born my parents wondered about:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

My parents' hopes for me are:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

My parents' lifetime goals for me are:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Here are some ways my parents have learned to help me be successful:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
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Sincerely,

__________________________________________

MY LEARNING STYLE

Three things that motivate me are:
1. ________________________________________________________________
2. ________________________________________________________________
3. ________________________________________________________________

My strengths are:___________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

These are details about how I communicate:__________________________________________
___________________________________________________________________________
___________________________________________________________________________

These are ways to communicate with me so that I’ll better understand you:_________________
___________________________________________________________________________
___________________________________________________________________________

These are ways to help me improve my fine and gross motor skills:__________________________
___________________________________________________________________________
___________________________________________________________________________

Here is what I need to improve my social skills:__________________________________________
___________________________________________________________________________
___________________________________________________________________________

Change is difficult for me, ways to help me transition more easily are:__________________________
___________________________________________________________________________
___________________________________________________________________________
MY FEELINGS AND BEHAVIOR

My feelings:
Things that make me feel happy are:______________________________________
Things that make me feel better are:_____________________________________
Things that may make me upset are:______________________________________
When I get upset I may say:____________________________________________
When I get upset I may do:_____________________________________________
Things that might make me sad are:______________________________________

My behavior:
I respond positively when:______________________________________________
When I am tired or not feeling well I may:_______________________________
Things I may be afraid of are:__________________________________________
When there is too much noise, talking I may:____________________________
When I become frustrated I may:_______________________________________
It is hard for me to:___________________________________________________
THINGS I LIKE

These are my favorite things:
Animal: ______________________
Activity: _____________________
Activity: _____________________
Activity: _____________________
Activity: _____________________
Activity: _____________________
Food: _________________________
Food: _________________________
Food: _________________________
Food: _________________________
Drink: _________________________

When I am inside I like to: _______________________________________
After school I like to: _____________________________________________
On the weekends I like to: _________________________________________
When I go outside: _______________________________________________
PLACES I LIKE TO GO

These are places I enjoy at my school:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

These are places that I like to go with my family:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

These are places that I like to go with my family and friends:

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

These are places I go in my neighborhood:

__________________________________________________________________________________

These are places I do not like to go:

__________________________________________________________________________________

Sometimes I wander but you can find me by looking:

__________________________________________________________________________________

PHOTOS
GO HERE

PHOTOS
GO HERE
THINGS I CAN DO FOR MYSELF:

THINGS I MAY NEED HELP WITH:

[ ] Dressing [ ] Zippers [ ] Coats [ ] Shoelaces [ ] Shoes/Boots

Toileting (including getting my pants on correctly):
__________________________________________________________

_________________________________________________________________________________________

Eating (including cutting my food and helping me clean up):
__________________________________________________________

_________________________________________________________________________________________

Other: ____________________________________________________________________________________
MY FEELINGS AND BEHAVIOR

My feelings:
Things that make me feel happy are:______________________________________
Things that make me feel better are:______________________________________
Things that may make me upset are:______________________________________
When I get upset I may say:____________________________________________
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I respond positively when:___________________________________________
When I am tired or not feeling well I may:_____________________________
Things I may be afraid of are:_________________________________________
When there is too much noise, talking I may:____________________________
When I become frustrated I may:______________________________________
It is hard for me to:_________________________________________________

HEALTH CONSIDERATIONS

Here are some things my parents want you to know about my health.

Health information:_____________________________________________________
Current medication(s):_________________________________________________
Medications taken at school:___________________________________________
Recurring illnesses:_____________________________________________________
Allergies:_____________________________________________________________
Glasses: [ ] Yes [ ] No   Need help cleaning my glasses: [ ] Yes [ ] No
Hearing loss: [ ] Yes [ ] No   Affected Ear(s):_____________________________
        Degree of loss:_________________________________________________
I have sensory needs:__________________________________________________
At times I may prefer certain foods such as:___________________________________
My stomach may hurt when:____________________________________________

Other things you may need to know about my health:_________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
These are my favorite things:

Animal: _______________________

Activity: _____________________

Activity: _____________________

Activity: _____________________

Activity: _____________________

Activity: _____________________

Food: _______________________

Food: _______________________

Food: _______________________

Drink: _______________________ 

When I am inside I like to: ____________________________________

After school I like to: ________________________________________

On the weekends I like to: ____________________________________

When I go outside: ___________________________________________

(Parent Attachment)

(Other things my parents and I would like you to know about me.)

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

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_________________________________________________________________

(Family Photographs)

Photos Go Here

Photos Go Here

Photos Go Here
SOMETIMES VISUAL SCHEDULES AND PICTURES HELP ME
Lastly, you might already know that persons with autism may possess many different characteristics.

To help you understand me better my parents have checked the characteristics of autism that I might display.

- Inappropriate laughing or giggling
- No real fear of dangers
- Apparent insensitivity to pain
- May not want cuddling, being touched
- Sustained unusual or repetitive play
- Play with toys in a different way
- Uneven physical skills
- Be very accepting of everyone
- May avoid eye contact
- Difficulty interacting with others
- Sometimes want to play with you
- May prefer to be alone
- Are loyal to friends
- Have a lot of energy
- Unable to verbally express my wants/needs
- May use gestures
- Like to flap and dance to music
- Inappropriate attachment to objects
- Insistence on sameness
- Echo words or phrases
- May look like I am not listening but I am
- Do my best to follow instructions
- May be bothered by bright lights
- Do not like loud sounds
- Know a lot of great movie quotes
- Honest and trustworthy
- Have a great memory
- Learn through picture
- Rock back-n-forth while sitting or standing
- Have many one-of-a-kind ideas
- Like to teach you about a topic I know a lot about