

**EVALUATION REPORT FOR \_\_\_\_\_**

**DOCUMENTATION FOR DETERMINING BRAILLE NEEDS FOR A  
CHILD WITH A VISUAL IMPAIRMENT (ER-3)**

**CESA #7 \_\_\_\_\_ SCHOOL DISTRICT**

Evaluation of the child's reading and writing skills, needs, and appropriate reading and writing media:

Does this child demonstrate a current need for instruction in Braille or the use of Braille?

Yes       No

*(If no, why not?)*

Does this child demonstrate a future need for instruction in Braille or the use of Braille?

Yes    No       Cannot be determined at this time *(If cannot be determined, explain)*

*(If no, why not?)*