**Data Collection Instruments and Forms**

***Referral Form***

It is an online form DBHDD personnel will fill out to refer individuals with developmental disabilities to Tools for Life (TFL) for Assistive Technology (AT) services. It includes information about individual’s demographic information, care provider information, needs identified, and referral source information. The Referral Form does not include any Protected Health Information.

***Demographic & Background Information Survey***

It is a survey TFL team will fill out via phone interview with the care providers of the participants that were referred by DBHDD. This survey will be in the Research Database. It includes information about the individual’s demographic information, disability status, and receptive language skills. It will take approximately 15 minutes to complete.

***Foundational Measures Survey*** (previously called National Core Indicator Survey)

This survey has been developed by one of the Co-PIs of the study to assess the impacts of the recommended AT according to National Core Indicators. It will be conducted at the beginning and at the end of the study as pre and post-test. There are two versions of the Foundational Measures Survey as *Individual Version* and *Care Provider* Version. Both versions will approximately take 30 minutes to complete.

* ***Individual Version*** (previously called version 1) of the Foundational Measures Survey will be used for participants who have receptive language skills. To clarify, receptive language skills, the ability to take in language and understand, include being able to follow directions, understand a story, and understand figurative language. Individuals with receptive language abilities can understand when they are spoken to and they can make their own decision.
* ***Care Provider Version*** (previously called version 2) of the Foundational Measures Survey will be used for participants who do not have receptive language skills. To clarify, individuals lacking receptive language ability have difficulty in processing language that is spoken and/or written. In order to avoid / prevent any possible coercion, care providers will be filling out the Foundational Measures Survey for the individuals without receptive language ability.

***AT Service and Training Form***

This form will be in the Research Database and will be filled out by TFL team. It will include information about AT suggested and training provided to the participants.

***Outcomes Questionnaire***

This questionnaire will be in the Research Database and has been developed by one of the Co-PIs of the study to assess the effectiveness of the recommended AT. It will be conducted at the beginning and at the end of the study as pre and post-test. It will be filled collaboratively by TFL team member and individuals with developmental disabilities or their care providers. It will take 30 minutes to complete.

***Observation Form***

This form will be in the Research Database and has been developed by one of the Co-PIs of the study. TFL team member will be taking observational notes about the participants’ home environment and circumstances that may affect their AT adoption.