

Potential Reinforcer Profile

Child's Name: _____

Date: _____

Name of Reporter(s): _____

Instructions: From each category, check **10** of the preferred items for your child. If items are not listed that are preferred by your child, please write those items next to "list other."

Visual Reinforcers

- | | | |
|--|---|---|
| <input type="checkbox"/> T.V./movies | <input type="checkbox"/> Pop-up toys | <input type="checkbox"/> Puzzles |
| <input type="checkbox"/> Computer games | <input type="checkbox"/> Balloons | <input type="checkbox"/> Stamp & stamp pad |
| <input type="checkbox"/> Video games | <input type="checkbox"/> Beads | <input type="checkbox"/> Crayons/Markers |
| <input type="checkbox"/> Wind-up toys | <input type="checkbox"/> Chalk & chalkboard | <input type="checkbox"/> Dress-up |
| <input type="checkbox"/> Light-up toys | <input type="checkbox"/> Waterwheels | <input type="checkbox"/> Pouring liquids |
| <input type="checkbox"/> Kaleidoscope | <input type="checkbox"/> Painting | <input type="checkbox"/> Glow in the dark items |
| <input type="checkbox"/> Stickers | <input type="checkbox"/> Viewfinder | <input type="checkbox"/> Spinning Objects |
| <input type="checkbox"/> Mirrors | <input type="checkbox"/> Snow globes | <input type="checkbox"/> Bright Lights |
| <input type="checkbox"/> Books | <input type="checkbox"/> Puppets | <input type="checkbox"/> Shiny Objects |
| <input type="checkbox"/> Toys with wheels | <input type="checkbox"/> Train with tracks | |
| <input type="checkbox"/> Car or marble ramps | <input type="checkbox"/> Magna-doodle | |

List other _____

List other _____

Auditory Reinforcers

- | | | |
|---|--|---|
| <input type="checkbox"/> Music (tape/C.D.) | <input type="checkbox"/> Singing songs | <input type="checkbox"/> Car sounds |
| <input type="checkbox"/> Books with sound effects | <input type="checkbox"/> Others people singing | <input type="checkbox"/> Beeps |
| <input type="checkbox"/> Whistles | <input type="checkbox"/> Party Blowers | <input type="checkbox"/> Sirens |
| <input type="checkbox"/> Toys that make noise | <input type="checkbox"/> Clackers | <input type="checkbox"/> Musical instruments: |
| <input type="checkbox"/> Music box | <input type="checkbox"/> Whistles | _____ |
| <input type="checkbox"/> Clapping | <input type="checkbox"/> Nursery Rhymes | _____ |

List other _____

List other _____

Therapists' tone of voice: (circle one) whisper yell high pitch low pitch

Tactile Reinforcers

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Stress ball | <input type="checkbox"/> Pipe-cleaners/Wikki-stix | <input type="checkbox"/> Bean bags |
| <input type="checkbox"/> Lotion | <input type="checkbox"/> Toys that are rubbery | <input type="checkbox"/> Feathers |
| <input type="checkbox"/> Shave cream | <input type="checkbox"/> Koosh-ball | <input type="checkbox"/> Ball pit |
| <input type="checkbox"/> Play-doh | <input type="checkbox"/> Finger painting | <input type="checkbox"/> Fan |
| <input type="checkbox"/> Clay | <input type="checkbox"/> Bumble ball | <input type="checkbox"/> Bubbles |
| <input type="checkbox"/> Putty | <input type="checkbox"/> Vibrating pen | <input type="checkbox"/> Crumpling/tearing paper |
| <input type="checkbox"/> Silly-string | <input type="checkbox"/> Pom-poms | <input type="checkbox"/> Cold things |
| <input type="checkbox"/> Sand play | <input type="checkbox"/> Glitter | <input type="checkbox"/> Warm things |
| <input type="checkbox"/> Water play | <input type="checkbox"/> Magnets | |
| <input type="checkbox"/> Bubble wrap | <input type="checkbox"/> Water balloons | |

List other _____

List other _____

Physical Play/Movement Reinforcers

- | | | |
|---|--|---|
| <input type="checkbox"/> Trampoline | <input type="checkbox"/> Bicycle/tricycle | <input type="checkbox"/> Bowling |
| <input type="checkbox"/> Bouncing on therapy ball | <input type="checkbox"/> Rocking chair | <input type="checkbox"/> Golf |
| <input type="checkbox"/> Rolling on floor | <input type="checkbox"/> Wagon rides | <input type="checkbox"/> Air hockey |
| <input type="checkbox"/> Spinning | <input type="checkbox"/> Dancing | <input type="checkbox"/> Tug-o-war |
| <input type="checkbox"/> Sock-em Boppers | <input type="checkbox"/> Swinging | <input type="checkbox"/> Rolling on stomach over large ball |
| <input type="checkbox"/> Sit & spin | <input type="checkbox"/> Crawling through tunnel | <input type="checkbox"/> Climbing |
| <input type="checkbox"/> Running | <input type="checkbox"/> Hide & seek | <input type="checkbox"/> Scooter board |
| <input type="checkbox"/> Jumping/hopping | <input type="checkbox"/> Skater/rolling blades | |
| <input type="checkbox"/> Skipping | <input type="checkbox"/> Skate board | |

List other _____

List other _____

Social Reinforcers

- | | | |
|--|---|--|
| <input type="checkbox"/> Adult attention | <input type="checkbox"/> OK sign | <input type="checkbox"/> Smiles |
| <input type="checkbox"/> Attention from other children | <input type="checkbox"/> High five | <input type="checkbox"/> Eye contact |
| <input type="checkbox"/> Being left alone | <input type="checkbox"/> Praise | <input type="checkbox"/> Public praise |
| <input type="checkbox"/> Hugs | <input type="checkbox"/> Public recognition | <input type="checkbox"/> Applause |
| <input type="checkbox"/> Private praise | <input type="checkbox"/> Thumbs up sign | <input type="checkbox"/> Tickle |
| <input type="checkbox"/> Being rocked | <input type="checkbox"/> Pats | <input type="checkbox"/> Shake hands |

List other _____

List other _____

Edible Reinforcers

Instructions: List **10** potential edible reinforcers (food or drink items) in order of most preferred (1 = most preferred, 10 = least preferred)

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Additional Comments: