

# STUDENT INTERVIEW

## For Students who are Blind or Visually Impaired

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

### Knowledge of Visual Impairment

What can you tell me about your visual impairment? \_\_\_\_\_  
\_\_\_\_\_

What do you have a hard time seeing? \_\_\_\_\_  
\_\_\_\_\_

Have you been prescribed glasses? Yes \_\_\_\_\_ No \_\_\_\_\_ Do you wear them? Yes \_\_\_\_\_ No \_\_\_\_\_  
If not, why? \_\_\_\_\_  
\_\_\_\_\_

### School Activities

What do you like about school? \_\_\_\_\_  
\_\_\_\_\_

Do you have any difficulty getting around the school campus? \_\_\_\_\_  
\_\_\_\_\_

What do some teachers do that make learning/seeing easier? \_\_\_\_\_  
\_\_\_\_\_

What strategies help you to see better? \_\_\_\_\_  
\_\_\_\_\_

Have you been prescribed low vision devices? Yes \_\_\_ No \_\_\_\_\_ Do you use them? Yes \_\_\_ No \_\_\_\_\_  
If so, for what? \_\_\_\_\_  
\_\_\_\_\_

Are you able to see your textbooks? Yes \_\_\_ No \_\_\_\_\_ If not, what do you have a difficult time seeing? \_\_\_\_\_  
\_\_\_\_\_

Are you able to see your handouts? Yes \_\_\_ No \_\_\_\_\_ If not, have you found anything to help you see them better? \_\_\_\_\_  
\_\_\_\_\_

Are you able to see information presented on the board? Yes \_\_\_ No \_\_\_\_\_ If not, what strategies do you use to see it? \_\_\_\_\_



Are you able to see information during school assemblies? Yes \_\_\_ No \_\_\_ Ball games? Yes \_\_\_ No \_\_\_  
If not, what do you do? \_\_\_\_\_

What school activities are you involved in? \_\_\_\_\_

Clubs? \_\_\_\_\_

Sports? \_\_\_\_\_

**Leisure Activities**

Do you have any hobbies? Yes \_\_\_ No \_\_\_ If so, what? \_\_\_\_\_

How do you like to spend your evenings and weekends? \_\_\_\_\_

How are you able to see labels and tags when you go shopping? What strategies do you use? \_\_\_\_\_

Are you able to read menus at restaurants? What strategies do you use? \_\_\_\_\_

Are you able to read fast food signs? What strategies do you use? \_\_\_\_\_

**Other**

What else can you tell me about your visual impairment? \_\_\_\_\_

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\_\_\_\_\_

