

Who Am I?

In order to better understand the needs of each individual, families are required to complete this 'Who Am I' form. The form is designed to provide us with important information about the participant such as their: needs, goals, likes/dislikes, assistance required, optimal forms of communication, typical group participation, common behavioral traits and need for individual support. The following information will help us to learn more about your child and plan to provide our optimal Mini U experience.

Our Environment

Our environment is energetic and fast-paced. Our days are full of activities. Participants will likely have a new location and activity every hour and adaptations every 15 to 20 minutes. Activities are dynamic and participants often engage in groups.

Will My Child Succeed?

If you believe your child will not be successful participating with a group of children of similar chronological age in this environment for at least 60 per cent of the day, then Mini U might not be the best fit. To discuss your child and our programs, connect with our associate director, Ashley Gagnon @ ashley.gagnon@umanitoba.ca.

Accommodations

Our leadership team discusses the needs and prepare accommodations for each individual. Our support leaders are responsible for identifying, creating and executing accommodation throughout their experience. We make every effort to be fully inclusive but do have some limitations in providing an experience for all children. Once we receive your completed special needs form we may need to discuss if and how we can best care for your child.

Personal Information

This information may be shared with anyone who is working closely with the child.

This personal information is being collected under the authority of The University of Manitoba Act. It will be used for the registration and admission of the applicant in the University of Manitoba Mini U Programs. It will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access and Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg MB, R3T 2N2.



Who Am I Form

This form is required at least 2 weeks before your child's start date.

Child First & Date:	Last Name:
Support Oր	otions (Please check an option below.)
Option	1: No Support
My child will p	articipate in a Mini U program group for the entire day, without the
assistance of	a one-on-one support leader. Families of children with special needs who
do not have a	n educational assistant at school will typically choose this option.
Option	2: With Support (registration online)
 My child will p	participate in a Mini U Program group with the assistance of a one on one
support leade	r. This option is designed for children who will be able to participate with
the group for	at least 60% of the day.
 Identify 	which of the following funding options applies to your child:
	We request a <u>Mini U funded</u> support leader.
	We request a support worker funded directly through Children's disAbility
	Services (note: the participant must have already been approved for this
1	option with their CDS case manager).
	We would like to request a <u>family funded</u> support leader,
	We are bringing our own support worker. Note : A child's parent/guardian
	may not act as the support worker.

A bit about me!
Age:
Need(s):
Associated Conditions/Needs:
Associated Conditions/Needs.
Medication / Allergies (please specify if medication is taken AT CAMP):
Goals
What do you hope your child will achieve from their Mini U experience?
Likes/Dislikes
1. What are your child's favorite activities?
2. What are some of your child's talents?
2. What are some or your orms statents:

	3. Are there any activities your child dislikes or struggles with?				
A = = i=1=====					
Assistance 1. Does your child have	ve the support of	an Educational Assistant at school?			
Yes	or	No			
Full Time	or	Part Time			
2. Please describe yo	ur child's ability t	to participate in physical activities:			
Communication					
	imal method(s) o	of communicating with your child?			
(For example, songs,					
(i or example, songs,	Roy Words, Syrric	7010)			
2. Please list or descri	ibe any learning	techniques or teaching strategies that have beer			
		techniques or teaching strategies that have been ual demonstrations, verbal instructions, physical			
helpful for your child.					
helpful for your child.					
		techniques or teaching strategies that have been ual demonstrations, verbal instructions, physical			
helpful for your child.					
helpful for your child.					

3. Are there any phrases or words that are helpful? Should be avoided?				
Group Participation				
1. What percentage	of time do y	ou think your child	d would be able to spe	end with a group
of children of about	the same ch	ronological age?	%	
2. Would your child	benefit from	taking breaks thro	oughout the day?	
	Yes	or	No	
activities they would		-	group, what are some g or reading)	alternate
4. Support workers	take a half-h	our lunch break e	ach day; during this ti	me would your
child be able to rem supervision, along		•	ervision, but without o	ne-on-one
Yes		or	No	
If yes, your child wo	ould be exped		in stationary, supervis	sed activities.
(For example: watc				
Behavior				
1. On a scale of 1-1 child to change?	, ,	•	ing very resistant) hov	v tolerant is your

Please explain:					
2. On a scale of 1-10 (10	being very extrem	ne) how extreme is your chi	ild's most		
disapproving response? _		<u></u>			
Please explain:					
To what triggers are these	e types of respons	ses typical (fears, frustration	ns etc.):		
How frequently do these i	eactions occur? _				
Would someone without s	special training be	able to handle this respon-	se?		
Yes	or	No			
Please explain;					
A quieter, more controlled	l location for drop	off & pick up is available.	Would your child		
be more successful if the	se arrangements v	were made?			
Yes	or	No			

Does your child have a Behavioral Education Plan, An Incredible 5 Point Scale plan, Alert Program's How Does Your Engine Run plan, or other? A photocopy of this plan would be very helpful, if possible please submit with this sheet.

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Is there anything else you would like us to know to help make this experience a success				
for your child?				

Inclusion Support Staff

In addition to our weeklong training session, some staff have extensive experience working with children with special needs. Others have undergone our training program but may have limited experience working one on one with children with special needs.

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Please list some of the characteristics you are looking for in a support worker:

If you feel your child's experience may be improved by meeting with a support leader prior to their attendance at camp then we may be able to make these arrangements. We may also be able to make arrangements involving pick up/drop off times. Please contact us at mini.u@umanitoba.ca to discuss.

Return the completed form to:

Mini U Programs 146 Frank Kennedy Centre - 420 University Crescent Winnipeg, Manitoba R3T 2N2