

Sensory Needs Checklist

A teacher-facing sensory profile — share with your child's teacher & school staff

Fill this out with your child and share it with their teacher, aide, or any school staff. This gives them a quick understanding of what overwhelms your child, what calms them, and which accommodations help most.

CHILD'S NAME

GRADE / TEACHER

DATE

Sensory Sensitivities — What Overwhelms My Child



Auditory (Sound)

- ☐ Loud noises ☐ Fire alarm ☐ Cafeteria
☐ Whispers



Visual (Sight)

- ☐ Bright lights ☐ Fluorescent ☐ Clutter
☐ Crowds



Tactile (Touch)

- ☐ Tags/seams ☐ Certain fabrics
☐ Glue/paint ☐ Hair brushing



Vestibular (Movement)

- ☐ Swings/spins ☐ Sits still
☐ Fear of heights ☐ Motion sickness



Oral (Mouth)

- ☐ Chews clothing ☐ Picky eater
☐ Food textures ☐ Bites objects



Olfactory (Smell)

- ☐ Strong smells ☐ Cafeteria food
☐ Markers/glue ☐ Perfumes

What Calms & Regulates My Child



STRATEGIES THAT WORK



SIGNS OF OVERWHELM



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Sensory Needs Checklist

Classroom Accommodations — check all that apply

Review these accommodations with your child's teacher. Check the ones that are most important for your child. This page can be attached to an IEP, 504 plan, or shared informally.

Environmental Accommodations

✓	ACCOMMODATION	NOTES
☐	Seating away from noisy areas (door, pencil sharpener, fans)	_____
☐	Preferential seating near teacher or front of room	_____
☐	Quiet corner or break space in classroom	_____
☐	Dimmed or natural lighting when possible	_____
☐	Visual schedule posted and reviewed daily	_____

Sensory & Regulation Supports

✓	ACCOMMODATION	NOTES
☐	Noise-canceling headphones for loud activities	_____
☐	Fidget tool or sensory item at desk	_____
☐	Movement breaks every ____ minutes	_____
☐	Weighted lap pad or compression vest (as recommended)	_____
☐	Chewelry or oral sensory tool	_____
☐	Calming sensory kit (brush, putty, textured items)	_____

Transition & Routine Supports

✓	ACCOMMODATION	NOTES
☐	5-minute warning before transitions	_____
☐	Visual timer for activities and transitions	_____
☐	Advance notice of schedule changes or substitutes	_____
☐	Buddy system for transitions (hallway, cafeteria, recess)	_____
☐	Alternative lunch setting (quiet room, small group)	_____

Additional Notes for the Teacher