



The Autism Program of Easterseals

University of Illinois Rockford 1601 Parkview Avenue | Rockford, IL 61107 tap.rockford@eastersealschicago.org P 815.395.5566 | F 815.395.5573

Social Skills Group Application

The Autism Program of Easterseals is very excited to offer Social Skills Groups for the upcoming year. The groups are for individuals diagnosed with autism spectrum disorder; ages 10-22. The groups will be held on Tuesdays for 10-week cycles that will be divided by age and functioning level. During the sessions the group facilitator will identify the strengths and needs of each group member using research-based interventions to target goal areas. Our goal is to build individual and group success within each session and carry over the desired skills to everyday life outside the Social Skills Groups.

Please fill out the information below and return to our office. Groups will be filled on a first come first serve basis.

Please note, by completing this application does not guarantee enrollment in the groups. One of our staff will contact you once we have received enough interest.

Parent / Guardian Name Click or tap here to enter text.

Address Click or tap here to enter text.

City/State/ Zip Click or tap here to enter text.

Best contact phone number Click or tap here to enter text.

Okay to leave message? Click or tap here to enter text. Yes Click or tap here to enter text. No

Email Address Click or tap here to enter text.

Relationship to Client Click or tap here to enter text.

Client's Name Click or tap here to enter text. Date of Birth

Gender Click or tap here to enter text.

Click or tap here to enter text.

Race Click or tap here to enter text.

Diagnosis

Diagnosis Made by Click or tap here to enter text.

Briefly describe your child Click or tap here to enter text.

What are activities that calm your child? Click or tap here to enter text.

What are activities that create anxiety? Click or tap here to enter text.

Insurance Company Name Click or tap here to enter text.