

# Social Skills Assessment Documentation

Client Name

Date

Assessor

## Assessment Areas

Skill	Observation/Notes	Rating
Initiating Conversation	<input type="text"/>	<input type="text"/>
Active Listening	<input type="text"/>	<input type="text"/>
Turn-Taking	<input type="text"/>	<input type="text"/>
Responding to Social Cues	<input type="text"/>	<input type="text"/>
Problem Solving in Social Situations	<input type="text"/>	<input type="text"/>

Strengths Observed

Areas for Improvement

Recommendations / Next Steps

