

This is my Autism Spectrum Condition Passport

My name is: _____

This passport belongs to me, please return it
to me when I leave.

This passport will help you understand my Autism
Spectrum Condition, as well as the:

Things you MUST know about me

Things that are IMPORTANT to me

My LIKES and DISLIKES

Please consult my passport whilst working with me and
before you do any interventions or referrals for me.

This passport has been developed by:



Autism Information
& Advice Service



Derby City Council



Mid Mercia



DERBYSHIRE
County Council



DERBYSHIRE
AUTISM SERVICES



UNIVERSITY OF
DERBY

Things you MUST know about me:

Name:

Likes to be known as:

Date of birth:

Address:

Tel:

My ethnicity:

How I communicate:

Family contact/carer/other support worker:

Relationship i.e. Mum, Dad, social worker, etc:

Their tel:

My support needs:

The professionals involved in my care are:

Allergies:

Physical needs:

Mental Health needs:

Learning difficulties:

Things that are important to me:

My sensory needs.
I do like:

My sensory needs.
I do not like:

Environments I prefer:

When I get upset/anxious I may:

How to help me when I am upset/anxious:

Abilities that may be affected by my Autism i.e. my concentration, my memory, my social conversation:

How I would like the outcome of today's meeting recorded i.e. please write-up everything we have discussed:

My Likes and Dislikes:

Things I like:

Things I dislike: