

Write all the letters of the alphabet in capital letters

Write all the letters of the alphabet in lower case letters

Copy the following sentence

Summer is so much fun.

--

Please include a copy of a typical writing assignment your child completed for school.

Mail to
Casa Colina Children’s Services Center
255 E Bonita Avenue, PO Box 6001
Pomona, CA 91769-6001

For questions call
909/596-7733, ext. 4200
or Fax 909/596-3548


Payment assistance may be available on a first-come, first-serve basis. Call Children’s Services for application.

For more information, please call 909/596-7733, ext 4200.



Children’s Services Center

Writing Workshop



A fun way to improve printing or cursive

Our writing workshop was created for children ages 4 years and up who are struggling with the mechanics of writing, either in printing or cursive. The children will be divided into groups to insure compatible ages and writing skills.

The Writing Workshop will meet for 10 sessions at 1-1/2 hours each. The children will participate in small groups of 3 to 6. The groups will be led by a pediatric occupational therapist.

The program is designed for children who know the letters but are struggling with learning printing or cursive, have illegible writing, have trouble keeping up with the speed of the class or tire easily with writing activities. It is appropriate for children who can follow verbal instructions and are relatively independent in small groups.

The program will promote development of underlying skills necessary for writing such as

- ◆ posture
- ◆ finger coordination
- ◆ functional pencil grasp
- ◆ visual motor skills

In addition, the Writing Workshop will teach letter formation through a multisensory approach so that the child develops a good, “felt” sense of how to write letters. This enables the child to write with less effort and conscious thought so that the child can focus on spelling, grammar, and composition.



Registration

Please complete the registration form and return it to Casa Colina. It may not be possible to accept all children who apply, depending on the number of applicants with similar needs/concerns. Priority will be given to children and their siblings who currently receive services from Casa Colina, or who have graduated from our programs.

Name of Child _____

Name(s) of Parents/Guardians _____

Birth Date _____ Phone Number (_____) _____

Diagnosis (if applicable) _____

Address _____

City _____ State _____ Zip _____

Casa Colina client? ☐ Yes ☐ No ☐ Graduate

The following questions are intended to help us design a group that will best meet the needs of all the children who attend the program.

◆ What concerns do you have about your child’s writing skills?

☐ Formation of letters ☐ Size of letters ☐ Spacing of letters ☐ Tires easily

☐ Writes with too much pressure ☐ Writes too lightly to see ☐ Legibility

☐ Takes long time to finish, is slower than peers ☐ Other

◆ Has your child expressed or shown concerns about writing? Please explain. _____

◆ Can your child identify his/her writing mistakes? ☐ Yes ☐ No

◆ My child can identify letters when pointed to in random order

 Capital letters: ☐ all ☐ most ☐ some ☐ none

 Lower-case letters: ☐ all ☐ most ☐ some ☐ none

◆ How many letters can your child print? Upper case _____ Lower case _____

◆ Has your child started to learn cursive? ☐ Yes ☐ No

◆ Can your child follow verbal instructions independently? ☐ Yes ☐ No

 If no, please explain _____

◆ How much supervision does your child need in a small group?

☐ One-on-one attention

☐ Will stay with the group, but frequently needs help to follow the directions

☐ Occasional directions to follow along with activities

◆ Does your child have a history of problematic social behaviors/interations with other children?

 Please explain _____

◆ Does your child use a typical adult writing grasp on a pencil? ☐ Yes ☐ No

 If no, please explain _____

Fee is \$650 for 10 sessions

◆ A \$50 activities fee per child is required upon registration with the balance due at the beginning of the sessions. The fee is not refundable if not canceled with adequate notice. Please check on cancellation policy.

◆ Total amount enclosed \$ _____

☐ Check (made payable to **Casa Colina**)

☐ Credit card – Please bill my ☐ Visa ☐ Mastercard

Card number _____ Expiration Date _____

Print name as it appears on card _____

Signature _____

Writing Sample

Please have your child complete the following items so that we can know their skills and how to best match them in a group of children that will meet their needs. Please try not to help your child with these items. It is important that we see your child’s true abilities. If you must help your child, please describe what help you gave the child

