



New Jersey Department of Human Services
 Division of Developmental Disabilities
www.nj.gov/humanservices/ddd



Prevocational Training Services – Activities Log

Name of Individual: _____

<u>Date</u>	<u># of Units</u>	<u>Strategies Addressed Today</u> (can use # from Individualized Goals form)	<u>Today's Activities to Address Strategies</u> (can use calendars or other activity lists that reflect today's activities, if applicable)	<u>Location of Activities</u>	<u>Notes Related to Today's Activities & Progress Toward Outcome(s)</u>
Total Units					

Completed by: _____