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## Narrative Format for Problem Solving

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Child's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Person completing narrative: \_\_\_\_\_

Date: \_\_\_\_\_

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*Please answer the following questions in as much detail as you can so that I can see your child through your eyes.*

What do you see as the problem?

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When and how did the problem become apparent?

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How do you feel about the problem?

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What interventions or things have you tried to do to deal with the problem before now and how did they work out?

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