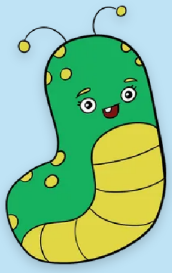
SPECIAL EDUCATION · 1ST–5TH GRADE · CALM DOWN · 5 OF 5

My Sensory Helpers

For each sense, check what is true for you. Then write what helps.

Name: _____ **Date:** _____



	Bothers me	I like it	What helps me
Loud sounds	☐	☐	
Bright lights	☐	☐	
Touch and textures	☐	☐	
Moving and spinning	☐	☐	
Strong smells	☐	☐	
Busy, crowded places	☐	☐	

One thing my teacher can do to help me:

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