

## After Us Document Two

To  
The Trustee After us Charitable trust  
Bangalore.

As desired by you we forward herewith the Daily living activities of our son/daughter, in the format prescribed by you for your perusal and record. We also authorise you to use the special character (positive or negative) of my dependent Special Need Individual Adult for his/her benefits or for the benefits of others and for the benefits of the organisation as a whole.

Name of the S N I

Age:-

Address:-

SL	Particulars	Comments by the Guardians.
1	Eating.	
	What kinds of food do S N I prefer to eat?	
	Morning Break Fast	

	Meals Noon	
	Evening Snacks	
	Night Meals	
	Preferences of Food (Solid)	
	Preferences of Fruits.	
	Preferences of Food ( Liquid).	
	Special Comments by the Guardians.	
2	Any assistance is to be provided to the SNI for eating Food?	
3	Dressing and Undressing	
	Can the SNI puts on and remove shoes/ shocks independently?	Yes/No
	Can the SNI ties the shoes less?	Yes/No
	Can the SNI put on and remove Shirts/ Pullovers etc independently?	yes/No
	Can remove the button of the	Yes/No

	shirts/ pants and close the same independently?	
	Can he/She change the under garments regularly?	yes/No
	Comments of the guardians on the above points and any assistance is required by the SNI?	
4	Toileting	
	Use of Toilet by The SNI. (Any problem please specify)	
	Bath (Self bathing or with any assistance). Please Specify.	
	Self care regarding all Bath room activities such urinate, Flashing, Hand washing etc. (Please Specify if the SNI is facing any problem in performing the above activities.)	
5	Tooth Brushing.	
	Tooth Brushing by the special Need Individual early in the morning before breakfast and in the night before going to bed.	
	Please specify the brand of the paste used by the S N I .	

	Special comment by the guardians on the above points.	
6	Saving, Hair Cutting, Hair combing and brushing.	
	Any problems on the above point please specify elaborately..	
7	Make Up	
	Applying Face wash/ Body cream by the S N I. Any specific problems in this regard please specify. Any preferences in Brand etc.	
8	Nail cutting by the S N I for both the legs and hands regularly.  ( please specify if any special assistance is required by the SNI or not.)	
9	Preparation of own bed for sleeping. – Spreading the Bed Sheet. – Folding and unfolding of Bed Sheet. –Identification of Dirty Bed Sheet, Pillow Cover and Towel. Comments of the Guardians on the above points.	
10	Meal Preparation.	

	What types and meals or drinks the S N I can prepare? Please specify.	
11	Uses of Kitchen Utensils and Kitchen appliances such as Mixer, Grinder, Micro-oven, Water-heater, Water filter, Refrigerator etc.	
12	Dining Table setting and serving. <ul style="list-style-type: none"> <li>–Such as pouring liquid water in the glass.</li> <li>– Putting table mates on the table.</li> <li>– arranging crockeries etc on the dining table</li> <li>–Cleaning up the table after lunch/dinner.</li> </ul>	
13	Laundry <ul style="list-style-type: none"> <li>–Identification of clean cloth and dirty clothes.</li> <li>– Putting dirty clothes in the buscate for washing.</li> <li>–Putting the dirty clothes in the washing machine for cleaning.</li> <li>–Putting detergent powder in the washing machine.</li> <li>–To put the washing Machine in operation.</li> <li>–To bring out washed clothes from the machine.</li> <li>–To hang all the washed clothes for drying in the sunlight or in</li> </ul>	

	<p>the daylight on a rope with clip.</p> <ul style="list-style-type: none"> <li>– To take out the dried clothes after drying.</li> <li>– To fold all the clothes properly.</li> <li>–To place all the clothes in the storage/wardrobe.</li> </ul>	
14	<p>Money skills</p> <ul style="list-style-type: none"> <li>– Can identify Indian coins and currency notes.</li> <li>–Can count and total the same.</li> <li>–Can purchase small required items from shops in exchange for money.</li> <li>–Can withdraw money from A T M.</li> <li>–Can deposit money in the nearest Bank Branch.</li> </ul>	
15	<p>Using Electronics Appliances.</p> <ul style="list-style-type: none"> <li>–Mobile phone.</li> <li>–Receiving Calls.</li> <li>–Calling someone.</li> <li>–Identify the called Number.</li> <li>–Picking up the required saved number from the storage of the phone.</li> <li>–Can save the number on the phone.</li> </ul>	
16	<p>Using Whatsapp.</p> <ul style="list-style-type: none"> <li>—Writing Messages.</li> </ul>	

	<ul style="list-style-type: none"> <li>—Sending Messages.</li> <li>—Reading Messages.</li> <li>— Save the name and Number .</li> <li>—Attaching documents or sending locations etc.</li> </ul>	
17	<p>Entertainments.</p> <ul style="list-style-type: none"> <li>—Using Laptop/ Desk-top for entertainment.</li> <li>— Using OTT platform.</li> <li>—Witnessing Facebook, Youtube, X, Instagram.</li> <li>—Listening Songs:- Hindi/ English/ Local Languages.</li> <li>—Watching Movies :- Hindi/ English/ Local Languages Movies.</li> <li>— Preferred Movies such as :- Romantic / Fiction/ Documentary/ Animated/ Religious/ Crime / Violence etc.</li> </ul>	
18	<p>Using Leisure time.</p> <ul style="list-style-type: none"> <li>— Preferred Long Drive.</li> <li>— City Tour by Bus.</li> <li>—Moving around the local Park.</li> </ul>	

	—Excursions.	
19	<p>Hobbies:-</p> <p>— Playing Electronics Games.</p> <p>—Tree Plantation.</p> <p>—Gardening.</p> <p>—Watering the small plants.</p> <p>—Preparing Kitchen Food items.</p> <p>—GYM</p> <p>—Painting Pictures.</p> <p>—Any other Please Specify.</p>	
20	<p>Behaviour:-</p> <p>—How the Spl Need Individual express his/her emotions:-</p> <p>— Express anger.</p> <p>—By doing harm to himself/ herself.</p> <p>— By hitting others.</p> <p>—By throwing out the nearby articles.</p> <p>— By tearing up the papers etc.</p> <p>— How he or She expresses Joy.</p>	



	<ul style="list-style-type: none"> <li>—Behaviour with a stranger.</li> <li>—Behaviour with Room mate.</li> <li>—Behaviour with Superiors.</li> <li>—Behaviour with Juniors.</li> <li>—Behaviour in a group.</li> <li>— Behaviour while alone.</li> </ul>	
21	<p>Identification of regular medicine and doses such as:-</p> <ul style="list-style-type: none"> <li>—Paracetamol Tablets—Fixation of doses and timings.</li> <li>— Cough Syrups Fixation of doses and timings.</li> <li>— Burn and cut.</li> <li>—Applying antiseptic creams.</li> <li>—Using Balm for headache.</li> <li>— Identification of uneasiness and expressing to others the exact problem he/ she is facing.</li> <li>—Taking prescribed medicines In time and in proper doses.</li> </ul>	

22	<p>Special comments by the Guardians, which will help the Trustee Board to take decisions in helping the Special Need Individual in day to day activities. ( both adverse and positive factors).</p> <p>The Guardians can attach a separate sheet if required, for expressing the proper position of dependent adult.</p>	
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Signature :- By the Guardian:-

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