

Functional Ability Questionnaire

The most significant challenge in outdoor education is removing the barriers that prevent those who are not participating.

We recognise that factors such as a lack of understanding, limited accessibility, and program design exclude people with impairments, which may cause them to feel they cannot participate in outdoor programs. We aim to change that perception by creating a more inclusive outdoor experience.

Please let us know your functional abilities to ensure a safe and enjoyable experience.

Participant Information

Participant name and age	
Describe the impairment that you/ the person lives with	

On a scale of 1 to 5, with 1 representing dependence on others or aids and 5 representing non-disabled function.

Consideration	#1-5	description
Breathing		
Hearing		
Sight		
Communicating		
Reading Writing		
Maintaining body temperature		
Skin and bone integrity		
Dressing and changing clothes		
Eating and drinking		
Physical strength and endurance		



Balance		
Understanding and following instructions		
Cognitive functions and learning		
Self-reliance		
Risk recognition		
Able to contribute to the group		
Respecting and supporting others' needs		
Emotional self-regulation during periods of stress		

What caregiving or personal support could be provided directly or indirectly during the event?	
What equipment and Aids do we need to be aware of that are critical for sustaining life and preventing harm?	
Is there anything else we need to know to ensure a safe and valuable experience?	

The person completing the form		Your relationship	
Your email address		Your phone number	