

# 4

## Motor skill Impairment



### Working in an environment with fine motor skill impairment/challenge



		<b>Instructions NON-PREFERRED HAND ALL ACTIVITIES</b>
<input type="checkbox"/>	<b>Step 1</b>	Sit at the table and pick up the figure 8 sheet of paper
<input type="checkbox"/>	<b>Step 2</b>	With your non-preferred hand draw 10 X figure 8 (stay within the lines)
<input type="checkbox"/>	<b>Step 3</b>	On a blank piece of paper rule a line down the middle of the page (on the side of the ruler furthest side to the ruler) Now rule a line across the middle using the bottom of the ruler (see example sheet)
<input type="checkbox"/>	<b>Step 4</b>	<b>PRINT</b> your name in the top quadrant opposite your writing hand <b>Write</b> your name in script/cursive in the bottom quadrant opposite to your writing hand
<input type="checkbox"/>	<b>Step 5</b>  <b>Reflect</b>	How did you FEEL?  Circle the emoji (on <b>your</b> card)

