

Self-Care Routine Charts

NAME _____

Add a picture to each step. Tick each one when it is done.

Brushing teeth

1  Toothpaste on the brush ☐ Done	2  Brush the top teeth ☐ Done	3  Brush the bottom teeth ☐ Done	4  Spit ☐ Done	5  Rinse and put the brush away ☐ Done
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Washing hands

1  Turn on the water ☐ Done	2  Soap on hands ☐ Done	3  Rub and count to 20 ☐ Done	4  Rinse ☐ Done	5  Dry with the towel ☐ Done
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Add this to your child's Bloom Autism Support: snap a photo and send it to your child's Bloom Autism Support email address.

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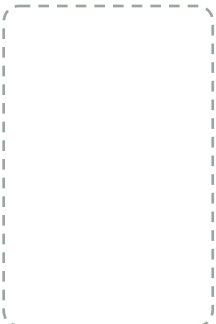
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Getting dressed

1  Underwear ☐ Done	2  Pants ☐ Done	3  Shirt ☐ Done	4  Socks ☐ Done	5  Shoes ☐ Done
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Bath time

1  Clothes off ☐ Done	2  Get in the tub ☐ Done	3  Wash body ☐ Done	4  Wash hair ☐ Done	5  Dry off with a towel ☐ Done
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