

1. *Directionality*: Focus on traveling in the same direction as peers, doing similar but modified versions of the same task.

Leaps	Turns	Kicks
Prance (prompt: be as light on feet as possible)	2nd → 1st position traveling	Steps from flat to relevé (step flat, raise, step flat, raise)
Jazz walk/run	Add 4 walks in between each turn	Raise leg as high as possible on flat foot

2. *Timing*: For each 8 count phrase, only perform the first 4-count, select half of the moves, or take 16 counts to complete the phrase, add walks in between moves for recovery.

<b>8-Count Phrase</b>	Chassé, sauté, contract, release
<b>Modified Timing 1</b>	Chassé, sauté, repeat (add 8 counts of walks in between if need)
<b>Modified Timing 2</b>	Chassé, walk walk, sauté, walk walk, contract, walk walk, release, walk walk

3. *Adjust technique expectations*: Consider what the goals of your class/program are and what the goals of the student's are. Adjust expectations accordingly, keeping in mind that we want students to leave with a positive dance experience.

<b>Relevé</b>	Flat foot
<b>Leg extension</b>	Bent leg. Consult with a doctor about safety in terms of flexibility and range of motion.
<b>Height/elevation</b>	Progress from flat foot, to rise on toes, to lift one leg off the ground, to leaving the ground
<b>Shapes</b>	Encourage full range of motion based on the individual rather than identical shapes to peers. Mirroring might also be helpful here to get an idea of what the student is capable of/their visual perception.

4. *Equipment support/task modification:* When appropriate, use equipment, modified or standard, to support the student or change the task.

<b>Balance</b>	Chair (seated support or hold on to the back while standing), barre, wall, take skill from one foot to two feet, widen base of support.
<b>Flexibility</b>	Decrease angles, provide with visual or tactile targets
<b>Posture</b>	Tactile boundaries (foam roll in between shoulder blades), differentiate and/or increase verbal cues, video modeling

5. *Safety:* Consult with the students IEP and/or doctor to understand contraindications for the student. Don't assume that they can't do something or are fragile, but take precautions to prevent injury.
6. *Do not isolate!* Unless absolutely necessary, do not place the student off to the side doing something completely different from peers. If you're unsure of a safe modification, consult your APE specialist (or me ;-)