

## Multiple Stimuli without Replacement (MSWO) Data Sheet

Child's Name: \_\_\_\_\_

Leisure/Food (Circle one)

Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_

List of Items:

_____	_____	_____	_____
_____	_____	_____	_____

Preference Assessment #1	
Order of items selected	# times chosen/ # of times available
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Preference Assessment #2	
Order of items selected	# times chosen/ # of times available
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Preference Assessment #3	
Order of items selected	# times chosen/ # of times available
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Preference Assessment #4	
Order of items selected	# times chosen/ # of times available
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Preference Assessment #5	
Order of items selected	# times chosen/ # of times available
1.	
2.	
3.	

Summary (high to low)	
Item	Total % Selected
1.	
2.	
3.	

4.			4.	
5.			5.	
6.			6.	
7.			7.	