

Paired Stimuli Preference Assessment

Student Name: _____ Date: _____

Observer: _____

Items / Activities						
Item # / Combination	1	2	3	4	5	6
1 / 2						
3 / 4						
5 / 6						
4 / 1						
2 / 5						
6 / 3						
4 / 2						
6 / 1						
5 / 3						
2 / 6						
1 / 3						
4 / 5						
3 / 2						
6 / 4						
5 / 1						
Total:						