## APPENDIX 6 - CHECKLIST

| RESPONSIBLE COACH:_ |  |
|---------------------|--|
| NAME:               |  |

| PREPARATIONS   | COMPLETED | COMMENTS |
|--|-----------|----------|
| Inform the person training about working memory training. (appendix 7).                                  |           |          |
| Decide location for training.  |           |          |
| Choose training program.   |           |          |
| Write in the training schedule when training will be carried out.(Appendix 10)                           |           |          |
| Choose rewards (Appendix 8) and write in training schedule (Appendix 10).                                |           |          |
| Decide time and place for follow up and enter in training schedule (Appendix 10).                        |           |          |
| Decide how to evaluate and what measures are to be used: see section on evaluation for more information. |           |          |
| Make appointments for all evaluations  |           |          |