

## Preschool Speech and Language Screening Questionnaire

Child's Name:	Parent(s) Name:
Child's Date of Birth:	Preferred Email:

### General Information

- Please list any specific concerns or questions you have regarding your child's communication skills
  
- Is there a language other than English spoken in the home? **Y / N**  
 If yes, which one(s)? \_\_\_\_\_  
 Does the child speak the language? **Y / N**  
 Who speaks the language \_\_\_\_\_  
 Which language does the child prefer to speak at home? \_\_\_\_\_
- Any family history of speech & language disabilities, hearing loss, developmental delays, etc.? **Y / N**  
 If yes, please explain: \_\_\_\_\_
- Has your child had a hearing exam? **Y / N**  
 If yes, provide date & outcome: \_\_\_\_\_
- Does your child have a history of ear infections? **Y / N**  
 If yes, how often & what type of treatment? \_\_\_\_\_
- Has your child had tubes inserted in his/her ears? **Y / N**  
 If yes, when? Are the tubes still in? \_\_\_\_\_
- Does your child use a pacifier? **Y / N**
- Does your child suck his/her thumb? **Y / N**

### Receptive Language (Understanding language)

Y = Yes; N = No/Rarely; S = Sometimes

Does your child:

- Point to items when named (e.g., "show me the \_\_\_ (ball, tree)")? **Y / N / S**
- Respond correctly to yes and no questions? **Y / N / S**
- Follow 1-step directions (e.g., "Give me the ball," "Come here")? **Y / N / S**
- Follow 2-step related directions (e.g., "Go get your shoes and put them on")? **Y / N / S**
- Able to answer "Who, What, Where" questions (e.g., "Who has a red shirt on?" "Where is your teddy")? **Y / N / S**
- Understands more complex questions (e.g., "Why did the boy run")? **Y / N / S**
- Understand a variety of basic concepts (e.g., big/little, in/on, fast/slow)? **Y / N / S**

### Expressive Language (Using Language/Vocabulary)

Number of words your child consistently uses: \_\_\_\_\_

Y = Yes; N = No/Rarely; S = Sometimes

Does your child:

1. Combine two words together (e.g., “more juice,” “Mommy go”)? **Y / N / S**
2. Use sentences of three-four words or more (e.g., “the dog is big”)? **Y / N / S**
3. Ask questions using Wh-words (e.g., “What is that?” “Where is Daddy?”)? **Y / N / S**
4. Tell simple stories or talk about past events (e.g., “I went to the park”)? **Y / N / S**
5. Use a variety of words (e.g., verbs, descriptors- not just nouns)? **Y / N / S**
6. Use correct grammar (e.g., uses plurals, past tense, small connecting words)? **Y / N / S**

### Speech Production (Pronunciation of words and clarity of speech)

What percentage of your child’s words do you understand (e.g., 25%, 50%, 90%)? \_\_\_\_\_

What percentage of your child’s words is understood by unfamiliar listeners (e.g., new friend, cashier)?

\_\_\_\_\_

Y = Yes; N = No/Rarely; S = Sometimes

1. Do new listeners (e.g., new friend, cashier) understand your child? **Y / N / S**
2. Do familiar listeners (e.g., family members) understand your child? **Y / N / S**
3. Does your child get frustrated when people can’t understand them? **Y / N / S**
4. My child has a hard time saying specific sounds (e.g., “s,” “l,” “k”) **Y / N / S**  
If yes, which ones? \_\_\_\_\_

### Pragmatic Language (Social communication)

Y = Yes; N = No/Rarely; S = Sometimes

Does your child:

1. Make eye contact when others talk to him/her? **Y / N / S**
2. Take turns in conversation or play? **Y / N / S**
3. Use words or gestures to ask for help or things they want? **Y / N / S**
4. Use language to comment on things (e.g., “Look, airplane!”)? **Y / N / S**
5. Stay on topic when having a conversation? **Y / N / S**
6. Adjust their message for different listeners (e.g., talks differently to a baby v.s. adult)? **Y / N / S**
7. Respond to his/her name? **Y / N / S**

### Fluency (Stuttering)

Y = Yes; N = No/Rarely; S = Sometimes

Does your child:

1. Pause as if thinking about what to say before or during speaking? **Y / N / S**
2. Add sounds, syllables, or words when speaking? (e.g., “uhm, can I, uhm, have the milk?”) **Y / N / S**
3. Revise phrases or sentences (e.g., “I want to, I’d like to go somewhere, can I go with you?”)? **Y / N / S**
4. Repeat phrases (e.g., “Can I, can I, can I get some milk?”)? **Y / N / S**
5. Stretch or hold on to a sound (e.g., “MMMMMMMMMom, I want that”)? **Y / N / S**
6. Demonstrate increased muscle tension in their mouth, throat, or lips when talking? **Y / N / S**