

Developmental Therapy Associates & Absolute Speech and Language Therapy

3624 Shannon Rd. Suite 104 Durham, NC 27707 Phone: 919-493-7002 Fax: 919-403-1407 875 Walnut St. Suite 100 Cary, NC 27511 Phone: 919-465-3966 Fax: 919-465-3886 186 Wind Chime Ct. Suite 104 Raleigh, NC 27615 Phone: 919-870-1280 Fax: 919-870-1285

Preschool/Daycare Teacher Questionnaire (3-5 years old)

The following child has been referred for an occupational or speech therapy evaluation. Please complete this questionnaire so that we may gain a more complete understanding of the child's performance when in your care. As this child's teacher(s), your input is very important and any insights are welcome. Information that you provide on this questionnaire will be used as part of the evaluation process and may be stated in the resulting occupational or speech therapy evaluation report. Thank You.

General Demographic Information

Date of completion

Child's Name

Child's DOB

Teacher's name

School Name

School/daycare phone #

What is the child's diagnosis or Exceptional Children's Classification (if any)?

Please list the early intervention specialists who work with the child and family (e.g., OT, PT, Speech, Occupational Therapy Speech Therapy Physical Therapy Special Education Other:

Educational Specialist).

What are you specific concerns regarding the child's performance and functioning?

Dressing:

Removing socks/shoes	
Putting on socks/shoes	
Removing simple clothes (jacket, pants for toileting, etc.)	
Putting on simple clothes (jacket, pants for toileting, etc.)	
Manipulating fasteners (VELCRO, buttons, zipper)	

Eating:

Drinking from bottle	
Swallowing drinks/food without choking	
Biting/chewing food without difficulties	
Eating finger food independently	
Using utensils (spoon, fork) opening milk carton	
Drink from a cup	
Demonstrate neatness when eating	
Demonstrating variety food preferences	
Appropriate social skills while eating	

Toileting/Bathroom:

Getting hands and face wiped	
Toilet trained (bowel, bladder)	
Managing clothing independently	
Washing/drying hands	
Turning on/off faucets	

Self-regulation:

Falling asleep easily at naptime	
Napping appropriate amount	
Demonstrates ability to not be fussy or colicky	
Demonstrates self-calming strategies	
Demonstrates ability to not tantrum	

Functional Communication:

Tolerating loud noises	
Indicating needs/wants to others	
Following verbal directions	
Comprehending what is happening around her/him	

Using/responding to non-verbal communication (gestures, facial expressions)	
Remaining focused despite environmental sounds	
Listening and paying attention to what is said	
Communicating appropriately with peers	

Socialization:

Initiates/establishes eye contact	
Demonstrates awareness of others	
Tolerates being hold or comforted by unfamiliar adults	
Asks for help appropriately	
Interacts without provoking others (does not usual hit, touch or bump, etc.)	
Makes friends	
Takes turns	
Shares materials or toys	
Works/plays cooperatively with others	
Transition to and from school (i.e. separates from parents)	
Participates in large group activities (not withdrawn,	

overactive, aggressive, passive, etc.)	
Standing in line without pushing, touching others	
Waiting his/her turn	

Learning Behaviors:

Demonstrates interest in toys	
Demonstrates age appropriate attention span	
Demonstrates appropriate frustration tolerance	
Demonstrates adequate work speed and task completion	
Organizes work space or materials	
Accepts changes in routines	
Demonstrates that new situations don't bother him/her	
Transitions between activities or locations without difficulties	

Motor Tasks:

Demonstrates hand preference	
Manipulates objects without dropping	
Uses scissors	

Grasps pencil (fingers around tip of the writing tool)	
Completes simple puzzles (i.e. form board, interlocking)	
Uses small manipulative toys	
Is able to draw simple pictures	
Carrying objects from one place to another	
Maneuvers around room without bumping into objects or people	
Sits without constant motion	
Does activities without easily fatiguing	
Sits upright over time without slumped position	
Walks in a coordinated fashion	

Leisure/Play Activities:

Plays well alone	
Plays well with others	
Participates in physical activities without coaxing	
Demonstrates confidence when doing new activities	
Follows rules of a game	
Joins an activity once it has started	

Demonstrates imaginative use of toys	
Creates or initiates play activities	
Participates in table top activities	
Participates in messy play activities (play-doh, finger paint, glue, etc.)	
Participates in gross motor activities (i.e. climbing on playground equipment, running, jumping, etc.)	
Uses riding toys	
Uses playground equipment (i.e. swing, slide, jungle gym)	
Throws/catches a ball	
Runs	
Skips	
Participates appropriately on field trips (rides the bus, pairs with peers, stays with the group, follows directions, etc.)	

Please provide any additional details on the areas included above or any other areas not mentioned.

What strategies are currently being used to help this child to be successful in the school environment?