

### Preschool Developmental Questionnaire

This Preschool Developmental Questionnaire is designed to give more information about your child/student as she/he prepares to enter preschool.

CHILD'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ COMPLETED BY:

_____ Parent	_____	Name
_____ Teacher	_____	Name
_____ Occupational Therapist	_____	Name
_____ Physical Therapist	_____	Name
_____ Pediatrician	_____	Name
_____ Other specialist	_____	Name

PLEASE DECIDE WHETHER THE FOLLOWING SKILLS ARE:

- ACHIEVED/CHILD IS ABLE TO DO: INDICATE WITH A PLUS (+) SIGN
- CHILD IS NOT ABLE TO DO YET WITH CONSISTENCY: INDICATE WITH A MINUS (-) SIGN
- CHILD SHOWS SOME SKILLS/OR COMPLETES TASK INCONSISTENTLY: INDICATE WITH AN "E" FOR EMERGING

\_\_\_\_\_ UNBUTTON FRONT OR SIDE BUTTONS \_\_\_\_\_ FASTENS FRONT FASTENINGS \_\_\_\_\_  
 WASHES AND DRIES HANDS INDEPENDENTLY \_\_\_\_\_ BLOWS AND WIPES NOSE ON REQUEST \_\_\_\_\_  
 \_\_\_\_\_ COVERS MOUTH ON REQUEST WHEN COUGHING \_\_\_\_\_ GETS SELF DRINK INCLUDING  
 POURING \_\_\_\_\_ REMAINS DRY THROUGH THE NIGHT \_\_\_\_\_ DISTINGUISHES FRONT FROM BACK OF  
 CLOTHING \_\_\_\_\_ DRESSES SELF EXCEPT FOR DIFFICULT FASTENINGS \_\_\_\_\_ WASHES AND DRIES  
 FACE INDEPENDENTLY \_\_\_\_\_ BRUSHES TEETH INDEPENDENTLY \_\_\_\_\_ SERVES SELF FOOD  
 \_\_\_\_\_ TOILETS INDEPENDENTLY \_\_\_\_\_ CLEANS FACE AND WIPES NOSE INDEPENDENTLY \_\_\_\_\_  
 BATHES SELF WITH SUPERVISION \_\_\_\_\_ SPREADS SOFT FOODS WITH A TABLE KNIFE \_\_\_\_\_  
 \_\_\_\_\_ LACES AND TIES SHOES \_\_\_\_\_ EATS A BALANCED DIET \_\_\_\_\_ GETS PLENTY OF REST  
 \_\_\_\_\_ RECEIVES REGULAR MEDICAL AND DENTAL CARE \_\_\_\_\_ HAS HAD ALL THE NECESSARY  
 IMMUNIZATIONS \_\_\_ RUNS, JUMPS, PLAYS OUTDOORS, AND DOES OTHER ACTIVITIES THAT HELP  
 DEVELOP HIS/HER LARGE MUSCLE GROWTH \_\_\_ WORKS PUZZLES, SCRIBBLES, COLORS, PAINTS, AND DOES  
 OTHER ACTIVITIES THAT HELP DEVELOP HIS/HER SMALL MUSCLES \_\_\_ HAS MANY OPPORTUNITIES TO BE  
 WITH OTHER CHILDREN AND IS LEARNING TO COOPERATE WITH THEM \_\_\_ IS LEARNING TO EXPLORE  
 AND TRY NEW THINGS \_\_\_ IS LEARNING TO WORK WELL ALONE AND TO DO MANY TASKS FOR HIMSELF  
 \_\_\_ IS CURIOUS AND IS MOTIVATED TO LEARN \_\_\_ IS LEARNING TO FINISH TASKS \_\_\_ IS LEARNING TO  
 USE SELF-CONTROL \_\_\_ CAN FOLLOW SIMPLE INSTRUCTIONS \_\_\_ HELPS WITH FAMILY CHORES \_\_\_ HAS  
 MANY OPPORTUNITIES TO TALK AND LISTEN \_\_\_ IS READ TO EVERY DAY \_\_\_ HAS ACCESS TO BOOKS AND  
 OTHER READING MATERIALS \_\_\_ IS LEARNING ABOUT PRINT AND BOOKS \_\_\_ HAS HIS TELEVISION  
 VIEWING MONITORED BY AN ADULT \_\_\_ IS ENCOURAGED TO ASK QUESTIONS \_\_\_ IS ENCOURAGED TO  
 SOLVE PROBLEMS \_\_\_  
 HAS OPPORTUNITIES TO NOTICE SIMILARITIES AND DIFFERENCES \_\_\_ IS ENCOURAGED TO SORT AND  
 CLASSIFY THINGS \_\_\_ IS LEARNING TO WRITE HER NAME AND ADDRESS \_\_\_ IS LEARNING TO COUNT AND  
 PLAYS COUNTING GAMES \_\_\_ IS LEARNING TO IDENTIFY AND NAME SHAPES AND COLORS \_\_\_ HAS  
 OPPORTUNITIES TO DRAW, LISTEN TO AND MAKE MUSIC AND TO DANCE \_\_\_ HAS OPPORTUNITIES TO GET

FIRST-HAND EXPERIENCES TO DO THINGS IN THE WORLD-TO SEE AND TOUCH OBJECTS, HEAR NEW SOUNDS, SMELL AND TASTE FOODS AND WATCH THINGS MOVE

PLEASE USE THE SPACE BELOW TO MAKE ANY ADDITIONAL COMMENTS:

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