

Abba's Child

LEARNING CENTER

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Integrated Listening Systems Checklist - Child

Student's name: _____ D.O.B. _____
Parent or guardian's name: _____ Phone# _____

Please put answers in pre-program column:

0 – does not apply 1 - rarely 2 – sometimes 3 - often/always

Pre-Program	SENSORY & SENSORY MOTOR	Post-Program
	My child has difficulty learning new things, especially motor skills	
	My child bumps into things a lot	
	My child is very sensitive to sounds (such as lawn mowers, vacuums)	
	My child is bothered by textures on body, face or hands	
	My child asks me to cut the tags out of clothing	
	My child is easily distracted by sounds	
	My child has poor posture, doesn't sit up straight	
	My child does not have good muscle tone	
	My child moves slowly, has low energy	
	My child moves quickly, always on the go	
	My child avoids eye contact	
	My child is unaware of body sensations: hunger; need for toilet; hot/cold	
	My child has poor balance, and falls easily; (avoids bike riding)	
	My child struggles with fine motor skills, such as hand writing	
	My child dislikes or avoids group sports	
	My child cannot follow directions in a noisy environment	
	My child has difficulty with visual pursuits, often loses place while reading	
	My child gets "hyper" in a busy environment	
	My child has difficulty completing puzzles	
	My child has difficulty judging force required for a task	
	My child has difficulty distinguishing between different letters or sounds	
	My child makes disruptive noises or sounds	
	My child avoids movement activities: swings, climbing, playgrd. activities	
	My child is clumsy, awkward, accident prone	

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Pre- Program	AUDITORY/LANGUAGE	Post-Program
	My child doesn't seem to hear me clearly when I speak to him or her	
	My child needs more repetition than expected	
	My child has difficulty following what others are saying	
	My child often confuses words and sounds	
	My child's language ability is behind his or her peers	
	My child mumbles and has a flat, monotone voice	
	My child thinks I am mad when I am joking	
	My child is unable to recognize or repeat rhymes or songs	
	My child has poor grammar and doesn't speak in complete sentences	
	My child is slow to react to speech	
	My child needs to be given directions repeatedly before responding	
	My child has difficulty with spelling	
	My child has a tendency to ramble, can't "get to the point"	
	My child seems to not understand what is being said, poor comprehension	
	My child has trouble differentiating similar sounds (like "f" and "th")	

Pre-Program	SOCIAL/EMOTIONAL	Post-Program
	My child is withdrawn and/or extremely shy	
	My child does not adjust to social situations well	
	My child does not make friends easily	
	My child does not transition easily from one activity to another	
	My child is irritable, and easily frustrated by daily life activities	
	My child has frequent mood fluctuations	
	My child lacks confidence with new environments and tasks	
	My child is not affectionate, does not like to be touched or hugged	
	My child is "needy" lacks independence, has low self esteem	
	My child's response to situations seems immature for age	
	My child is anxious, bites nails, face and body are not relaxed	
	My child acts impulsively, has lack of tactfulness	
	My child does not sleep well or cannot get enough rest	

Pre-Program	ORGANIZATIONAL/ATTENTION/COGNITIVE	Post-Program
	My child is distracted easily and not able to stay on task	
	My child has poor short term memory	
	My child must re-read school work several times to comprehend	
	My child has difficulty finding clothes, getting dressed in the morning	
	My child has difficulty planning ahead – avoids planning at all	
	My child is disorganized with school assignments, belongings, schedule	
	My child has difficulty remembering sequential tasks	
	My child fails to begin or to complete tasks or projects unless helped	