The School Board of St. Lucie County Exceptional Student Education

Communication Skills Checklist for Teachers

Student's Name:	Student ID#:				
Date of Birth:	Birth: School:				
<u>SPEECH</u> Articulation					
 Does the child exhibit errors in his/her sound system (articulation)? If YES, please indicate (circle; mark) those sounds you think s/he uses incorrectly— By age Speech Sounds that should be Mastered 					NO
4 4½ 5½ 6 7 8+	p, b, m, f, w, h, n k, g, t, d y (j)	consonant blends (st, pl, gr, etc); v l, sh, ch, j (dz); th ("that") voiced	r, s, z, zh, -ing; th ("thumb") voicele	255	
 Do you <u>frequently</u> Does the student h Voice 4. Does the student " If yes, check the n too hi 	YES YES YES	NO NO NO rough			
 Fluency of Speech (i.e., Stuttering) 5. Does the student <u>frequently</u> "get stuck" trying to get the words s/he wants to say? 					NO
LANGUAGE 6. Does the student seem to know what s/he wants to say, but frequently has trouble getting the words strung together to give you his/her response? YES NO					
 Does the student <u>f</u> Does the student <u>f</u> the names for thin Does the student <u>f</u> 	YES YES YES	NO NO NO			
just listened to? 10. Does the student <u>f</u> him/her?	YES	NO			
 11. Does the student <u>f</u> 12. Does the student <u>f</u> listening to a story 	YES YES	NO NO			
13. Does the student of	often respond to a	a question by giving a seemingly ifficulty relating to and talking w		YES YES	NO NO
		re in the area of Math differ mark ge Arts? If "yes," which is super		YES anguage A	NO Arts

COMMENTS:

In your best professional judgment, pl	ease indicate	what you conside	er to be this student's area of
PRIMARY difficulty at this time— _	academic	behavioral	intellectual / cognitive
		language	speech

Teacher Signature:

Date Completed: