



PARENT - CARER QUESTIONNAIRE
LANGUAGE DEVELOPMENT CENTRE/SCHOOL PLACEMENT
KINDERGARTEN 2025

** Please complete this form with your Speech Pathologist **

CHILD'S NAME: PARENT/CARER:

DAY CARE PARENT/CARER'S CONTACT NO:

PARENT/CARER'S CONTACT DAYS:

PERSON(S) COMPLETING QUESTIONNAIRE:

RELATIONSHIP(S) TO APPLICANT:

SIGNATURE: DATE:

Please rate the child to the expectations of a typically developing child of the same age. Tick the box of the rating that best indicates the child's current level of achievement in each of the areas indicated. Please answer all questions to the best of your knowledge and complete the comments sections.

INDEPENDENCE SKILLS

Always Mainly Sometimes Never Unable to Comment Comments

Dresses self

Toilets self

Feeds self without assistance

Attempts to solve problems

Asks or gestures for help when needed

States or indicates when he/she does not understand

SENSORY PROCESSING

Always Mainly Sometimes Never Unable to Comment Comments

Fixates on specific objects

Hypersensitive (over reacts) to sensory stimuli (visual, auditory, tactile, olfactory, taste & texture)

Hyposensitive (under reacts) to sensory stimuli (visual, auditory, tactile, olfactory, taste & texture)

SOCIAL / EMOTIONAL DEVELOPMENT

	Always	Mainly	Sometimes	Never	Unable to Comment	Comments
Joins in rituals of social interaction e.g. saying hello, goodbye						
Is confident and self assured						
Appears overly anxious or worried						
Can separate from parents without excessive prolonged crying						
Accepts adult direction						
Responds appropriately to praise						
Has a sense of right and wrong						
Accepts changes in an activity or routine without undue stress						
Uses eye contact appropriately						
Can take turns						
Uses facial expressions appropriately to demonstrate feelings						
Tends to have a blank expression, has difficulty showing emotion						
Plays by self, not interested in playing with other children						
Mainly plays alongside other children						
Gets frustrated or annoyed if others try and join in play						
Starting to play cooperatively with other children						
Is accepted by other children						
Is aggressive towards other children						
Is a loner, not disliked by other children but neglected by them						
Fixates on toys – will only play with ‘favourite’ toy, not interested in other toys						
Play is rote and repetitive with little flexibility – will play in the same way every time						
Play is not symbolic or imaginative e.g. bashes, stacks items						
Beginning to develop imaginative play e.g. feeds teddy, plays going shopping						
Engages in a range of imaginative play activities						
Able to show concern for the distress of others						
Can initiate conversation on a specific topic of interest centering on own world knowledge.						

Please make additional comments to the above points or where relevant:

What can affect the child's anxiety/worry levels if they do present as anxious/worried?

The child's reaction to changes in routine.

Observed gross or fine motor difficulties.

Physiotherapy or Occupational therapy involvement?

If the child has difficulty with solving conflict, what strategies do they try to use?

If the child is not developing peer relationships, what could this be due to (e.g. plays aggressively, uses little language, hard to understand etc)?

Other Comments

Thank you for your valuable information