



# Communication Screener

Child Name: \_\_\_\_\_

Child Birthday: \_\_\_\_\_

Screener Date: \_\_\_\_\_

Person Completing: \_\_\_\_\_

## GENERAL COMMUNICATION

**HOW IS YOUR CHILD CURRENTLY COMMUNICATING?**

- Talking
- Pointing and Gestures
- Bringing you to the item(s) they want?



Yes/No

**SOCIAL ENGAGEMENT**

- Will your child sit by you when you read a book?
- Will your child sit by you to play with toys?
- Will your child help you with routines around the house?

**REQUESTING**

How does your child let you know that they want something or that they want to do something?

Yes/No

**MATCHING**

- Is your child able to do simple puzzles?
- Is your child able to match the same items or pictures?



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## PLAY

Yes/No

 

Does your child enjoy playing with toys?

 

Does your child enjoy playing with a variety of toys?

 

Will your child explore new toys?

 

Does your child enjoy play activities?

What toys does your child currently enjoy playing with? What play activities does your child currently enjoy?

## FOLLOWING ONE STEP DIRECTIONS

Yes/No

 

Is your child able to follow simple one step directions? (i.e. get your shoes, give that to mommy, get your blankie)

## LABELING

Yes/No

 

Is your child able to label items?

 

Is your child able to label actions?

## FILLING IN THE BLANKS

Yes/No

 

Is your child able to fill in the blank for familiar phrases? ( Ready, Set, \_\_\_\_\_, A,B,C, \_\_\_\_\_)



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## IMITATION

Yes/No

 

Is your child able to imitate actions?

 

Is your child able to imitate actions with  
objects?

 

Is your child able to imitate sounds or words?

## Spontaneous Communication

**IF YOUR CHILD IS SPONTANEOUSLY  
COMMUNICATING- NOTE SPECIFIC EXAMPLES BELOW**

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**OTHER NOTES**

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