

Developmental Check List (3 years)

Child's Name: _____ **Date of birth:** _____

Note: Each behavior must be observed over a period of time for a "yes" check. "No" should be checked if the behavior is not observed.

Observation #1

Date of rating

Child's Age

Conference Date

Observation #2

Date of Rating

Child's Age

Conference Date

	Observation #1		Observation #2	
	Yes	No	Yes	No
Cognitive				
Names or pairs items that go together (toothbrush and toothpaste; spoon and fork)				
Tells appropriate action for if / what questions				
Knows the daily schedule or sequence				
Knows what happened yesterday				
Classifies objects by colors, use or category				
Follows three step directions				
Speaks clearly enough for adults to understand				
Takes part in conversation with other children				
Asks what / when questions frequently				
Spontaneously uses 4 to 6 word sentences				
Uses simple sentences to tell a story from pictures				
Know night and day				
Understands "yesterday", "summer", "lunchtime", "tonight", "little – big"				
Knows his or her last name				
Knows his or her sex				
Knows the name of street in address				
Knows several nursery rhymes				
Can tell a story or relay an idea to someone				
Has a vocabulary of nearly 1000 words				
Can produce a consistently "m, n, ng, p, f, h, and w"				
Repeats sounds, words, and phrases				
Can sing songs				
Expresses fatigue verbally				
Can stay with one activity 8 or 9 minutes				
Asks what question frequently				
Social and Emotional	Yes	No	Yes	No
Participates in a small group activity (3 – 4 children) for 10 – 15 minutes				
Stays actively involved in a chosen task for 15 minutes				
Initiates social interaction with another child or adult (asks another to				

