

Child's name: \_\_\_\_\_

Child's date of birth: \_\_\_\_\_

Any allergies (especially food): \_\_\_\_\_

Child's likes: \_\_\_\_\_

Child's dislikes: \_\_\_\_\_

Please answer yes or no to the following:

Able to greet and say goodbye appropriately  yes  no

Makes eye contact  yes  no

Keeps appropriate distance from people during conversation (not too far or too close)  yes  no

Is polite (please, thank you, etc.)  yes  no

Asks appropriate questions  yes  no

Answers questions appropriately  yes  no

Initiates conversation or a new topic  yes  no

Stays on topic  yes  no

Plays well with adults  yes  no

Plays well with peers  yes  no

Shy  yes  no

Interrupts  yes  no

Speaks too loud  yes  no

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Shares easily                                     | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Impatient   | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Takes turns during conversation                   | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Takes turns during games/play                     | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Follows the rules of games/play                   | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Difficulty showing emotions or talking about them | <input type="checkbox"/> yes | <input type="checkbox"/> no |

Please feel free to list any additional information or concerns not addressed or to expand upon any of the above questions (on the back of this paper).  
Thank you!