**SPEECH AND LANGUAGE SCREENING REPORT**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME:** |  | | | | **DATE OF BIRTH:** | | | |  | | |
| **PARENTS:** |  | | | | **CHRONOLOGICAL AGE:** | | | | years months | | |
| **ADDRESS:** | , BC V0G | | | | **SCREENING DATE:** | | | |  | | |
|  |  | | | | **CLASSROOM TEACHER:** | | | |  | | |
| **TELEPHONE:** | 250- | | | | **GRADE:** | | | |  | | |
| **SCHOOL** |  | | | | **SPEECH LANGUAGE PATHOLOGIST:** | | | |  | | |
| **ASSESSMENT TOOLS** | *Clinical Evaluation of Language Fundamentals (CELF-P2) Peabody Picture Vocabulary Test (PPVT-4) Renfrew Action Picture Test (RAPT)* | | | | | | | | | | |
| **TEST FINDINGS:** | | | | | | | | | | | |
| **PPVT-4** | | **Standard Score** | | | | **Percentile** | | **Age Equivalent** | | | |
| **CELF-P2 Core Language Score** | | **Standard Score** | | | | **Percentile** | |  | | | |
| **RAPT – Information**  **RAPT – Grammar** | | **Raw Score**  **Raw Score** | | | | **Age Range**  **Age Range** | |  | | | |
| **COMMUNICATION SKILLS:** | | | **Appeared Typical** | | **Further Intervention Indicated** | | **Monitor** | | | | **Not Evaluated** |
| Receptive Language (Understanding) | | |  | | **** | |  | | | |  |
| Expressive Language (Verbal Skills) | | |  | | **** | |  | | | |  |
| Articulation (Clarity / Pronunciation) | | | **** | |  | |  | | | |  |
| Comments: | | | | | | | | | | | |
| **RECOMMENDATIONS:** | | | | | | | | | | | |
| No further follow up required by the Speech-Language Pathologist. | | | | | | | | | | | |
| Student requires further intervention | | | | | | | | | | | |
| Communicating For Success Program | | | | | | | | | | | |
| Strategies will be discussed with the classroom teacher on an ongoing basis. | | | | | | | | | | | |
| Referral to       is indicated. | | | | | | | | | | | |
| Student should be seen for a hearing screening: | | | | | | | | | | | |
| **S-LP Signature:** | | | | **Your Name:**  **Registered Speech-Language Pathologist** | | | | | | **Date:** | |
| **cc:**  **Student File, Speech-Language File, Principal** | | | | | | | | | | | |