

Martinsville City Schools
Speech, Language, and Voice Screenings
New Students in Grades K-3

This screening instrument is designed to be implemented by the classroom teacher within 60 days of initial enrollment. Teachers may pass students who demonstrate no speech-language-voice problems on this checklist. Any student who does not pass shall be referred to the speech-language pathologist who shall conduct a second screening within the 60 business day timeline.

| In comparison with his/her peers: | Never | Sometimes | Always |
|--|--------------|------------------|---------------|
| The child is difficult to understand. | | | |
| The child has a hoarse or nasal voice that does not seem related to a cold or allergies | | | |
| The child has difficulty with age appropriate phonological awareness activities (e.g. rhyming, sound blending, and syllable segmentation). | | | |
| The child has difficulty following directions or responding to questions. | | | |
| The child has difficulty making wants and needs known. | | | |
| The child has difficulty using complete sentences or correct grammar. | | | |
| The child has a limited vocabulary. | | | |
| The child has difficulty expressing an idea or event (i.e., what he did over the weekend). | | | |
| The child appears frustrated when speaking. | | | |
| The child exhibits part-word or word repetitions, sound blockages, or excess facial or neck movement when speaking (stuttering). | | | |

Other communication concerns: _____

Pass: “Never” is checked for all items and there are no other communication concerns.

Not Pass: “Sometimes” or “Always” is checked for any item or other communication concerns are identified. The speech-language pathologist shall rescreen the child and make the final determination regarding “pass” or “fail.”

Completed forms shall be forwarded promptly to Liz Hoskins at Central Office within 30 days of enrollment.