

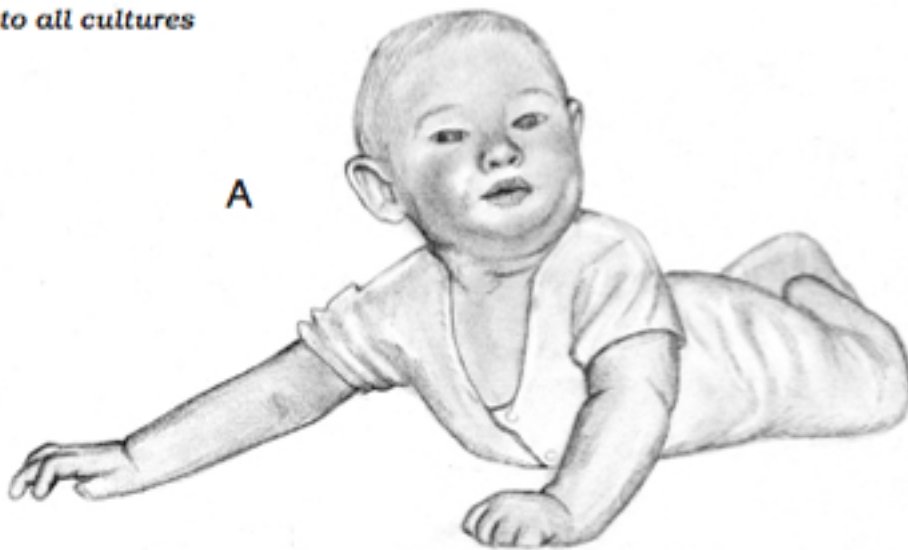
**The Nipissing District Developmental Screen™ is a checklist designed to help monitor your child's development.**

✓ ✓  
**Yes No**

**By Six Months of age, does your baby...**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Follow a moving object with his/her eyes?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Look in the direction of a new sound?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Respond to own name?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Smile and babble when given adult attention?                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Vocalize pleasure and displeasure (e.g. squeal with excitement or grunt in anger)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Seem to understand some words (e.g. daddy, bye-bye)?                               |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Have a "conversation" by babbling with you?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Roll from back to stomach or stomach to back?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Push up on hands when on tummy? (Picture A)*                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Sit with support?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Use hands to reach, grasp, bang and splash?                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Bring hands or toy to mouth?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Pat and pull at your hair, glasses and face?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Sleep and feed at regular times?  |

\* item may not be common to all cultures



**6 MONTHS**  
Always talk to your health care or child care professional if you have any questions about your child's development or well being. See reverse side for instructions, limitation of liability, and product license.

Filled Out By:  
Relationship To Child:  
Doctor's Comments: