

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

✓ ✓
Yes No

By Four Years of age, does your child...

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Understand three-part related directions and longer sentences (e.g. "Put your toys away and wash your hands before lunch")? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Say rhymes or sing children's songs? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Ask lots of questions (e.g. "How?" and "Why?")? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Correctly say the words - two, hat, do, mud, fun, off, key, cookie, go, hug? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Use some word endings as in running and jumped? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Tell what is happening in a picture when you ask? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Speak clearly enough to be understood most of the time? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Go up and down stairs alternating feet (with one foot on each step)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Stand on one foot for one to three seconds without support? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Try to hop on one foot? |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Catch a large ball with outstretched arms? |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Snip paper with scissors? (Picture A) |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Draw a person with three or more body parts? |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Hold a crayon or pencil correctly? |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. Undo buttons and zippers? |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. Use the toilet/potty during the day (i.e. toilet trained)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. Take turns and share with other children in small group activities? |
| <input type="checkbox"/> | <input type="checkbox"/> | 18. Try to comfort someone who is upset? |
| <input type="checkbox"/> | <input type="checkbox"/> | 19. Play near and talk to other children while continuing with own activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | 20. Look for adult approval (e.g. "Watch me." or "Look what I did")? |



Note: It is recommended that all children by this age have a vision, hearing and dental checkup. Ask your family doctor or public health unit where these services are available in your community.

Filled Out By:

Relationship To Child:

Doctor's Comments:

4 YEARS
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.