

## 3 YEAR CHECKLIST

**Referring Agency:** This form should be completed by the referring professional and the parent together as part of a conversation about the child's development. If you and the parent agree that a referral to Language Express is warranted then **fax the completed form to Language Express at 613-283-2924**. If you have any questions please call 613-283-2742 or 1-888-503-8885.

**Referred by:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

### Parent Consent

I hereby authorize \_\_\_\_\_ (*name of referring agency*) to complete and release this Speech/Language Checklist to the Preschool Speech-Language Services System.

I consent to the sharing of information between Language Express and \_\_\_\_\_ (*name of referring agency*).

I understand that all information about my family will be kept confidential, and that I will be contacted to complete the referral process. *No services will be provided until direct contact has been made with the parent or legal guardian and consent for service has been obtained.*

\_\_\_\_\_  
*Parent/Guardian's Signature*

\_\_\_\_\_  
*Witness' Signature*

\_\_\_\_\_  
*Date*

Child's Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Primary Contact Number: \_\_\_\_\_ Secondary Contact Number: \_\_\_\_\_

### Has the child had two or more ear infections, or fluid in the middle ear?

Yes  No

### Please check all the items below which describe the communication style of the child:

- Understands same/different, one/all, heavy/light, night/day
- Enjoys pretend play and playing with other children
- Can talk about something that happened in the past (e.g. trip to Grandma's)
- Says 4-7 words in a sentence "I want my red ball."
- Understands and asks "Who?" "What?" "Where?" and "Why?" questions
- Adults outside of your family understand at least half of what your child says
- Can clearly make these sounds in words: p, b, m, n, h, w, d

**Do not refer for errors on l, sh, ch, v, y, r, th and lisps. These errors are normal at this age.**

**If a child is missing one or more of the above please refer to Language Express by faxing this form to 613-283-2924 or calling our Intake Line at 1-888-503-8885.**

### Any other comments or concerns regarding the child's overall development?

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