Adelphi University Language Development Survey

Child's Name:		Male/Femal	e (circle)
Child's Date of Birth:	Today's Date:		
Name of person completing form:			
Relationship to child:	Phone:		
Home zip code:			
Child's diagnosis:			
When was diagnosis made? Month			
Is there a family history of language or rea	ading disabilities? (circl	e) Yes/no	
If yes, please explain:			
When did your child begin speech therapy	? Month	Year	
Mother's highest education level: (circle)	Less than High School	High School	College
What language does your child prefer to s	peak?		
Is your child exposed to two languages? (a	circle) yes/no What lan	guage?	
If your child is exposed to two languages,	does your child use any	words in the	second
language? (Circle) Yes/no If yes, about	t how many?		
What were your child's first five (5) word	s?		
Ethnicity (optional):			

- Please CIRCLE any word your child has said, signed, or used a picture to communicate INDEPENDENTLY (NOT on imitation). Don't circle a word if your child only understands it. Do circle words that your child may not pronounce clearly, but you understand.
- 2. In the second column:
 - a. If the child SAYS THE WORD, identify with W.
 - b. If child SIGNS the word, identify with S.

REMEMBER, CIRCLE ONLY WORDS YOUR CHILD CAN SAY or SIGN ALL BY HIM/HERSELF! At least 3 X!!!

Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"
FOODS		ANIMAL		OUTDOORS	
Apple		NAMES		Flower	
Bagel		Bear		House	
banana		Bee		Moon	
Bread		Bird		Rain	
Butter		Bug		Sidewalk	
Cake		Bunny		Snow	
Candy		Cat		Star	
Cereal		Chicken		Street	
Cheese		Cow		Sun	
Chicken		Dog		Tree	
(nuggets)					
Coffee		Duck		TOYS	
Cookie		Elephant		Ball	
Crackers		Fish		Balloon	
Drink		Frog		Blocks	
Egg		Horse		Book	
Food		Monkey		Bubbles	
French Fries		Pig		Crayons	
Grapes		Puppy		Doll	
Gum		Snake		Picture	
Hamburger		Tiger		Present	
Hot dog		Turkey		Slide	
Ice cream		Turtle		Swing	
Juice				Teddy bear	
Meat		PEOPLE		PLACES	
Milk		Aunt		Church	
Orange		Baby		Home	
Pizza		Boy		Hospital	
Pretzel		Daddy		Library	
Soda		Doctor		McDonald	
		Girl		Park	
Soup Spaghetti		Grandma		School	
Tea		Grandpa		Store	
Toast		Lady		Zoo	
Water		Man		CLOTHES	
		Mommy		Hat	
		Own name		Shoes	
		Pet name		Socks	
		Uncle		Pajamas	
		Ernie, etc.		Shirt	
		Siblings'		Pants	
		names		coat	
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Adapted from: Rescorla, L., (1989). The language development survey: A screening tool for delayed language in toddlers. *JSHD*, *54*, 587-599.

Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"
BODY		VEHICLES		HOUSEHOLD	3
PARTS		Bike		Bathtub	
Arm		Boat		Bed	
Belly		Bus		Blanket	
Bottom		Car		Bottle	
Chin		Motorcycle		Bowl	
Ear		Plane		Chair	
Elbow		Stroller		Clock	
Eye		Train		Crib	
Face		Trolley		Cup	
finger		Truck		Door	
Foot				Floor	
Hair		ADJECTIVES		Fork	
Hand		Bad		Glass	
Knee		Big		Knife	
Leg		Black		Light	
Mouth		Blue		Mirror	
Neck		Broken		Pacifier (or own name)	
Nose		Clean		Pillow	
Teeth		Cold		Plate	
Thumb		Dark		Potty	
Toe		Dirty		Radio	
Tummy		Dry		Room	
1 uninity		Good		Sink	
PERSONAL		Нарру		Soap	
Brush		Heavy		Sofa	
Comb		Hot		Spoon	
Glasses		Hungry		Stairs	
Key		Little		Table	
Money		Nice		Telephone	
Paper		Pretty		Towel	
Pen		Red		Trash	
Pencil		Stinky		TV	
Penny		Tired		Window	
Pocketbook		Wet		., 11140 ,	
Tissue		White		NON- SPECIFIC	
Toothbrush		Yellow		Here	
Umbrella		Yucky		There	
Watch		1 don't		This	
				That	
		1	1	1 11111	1

Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"	Word	Write how child says word or write "sign"
ACTION		ACTION		SOCIAL	
Bath		See		1,2,3	
Breakfast		Show		A,B,C	
Bring		Sing		All right	
Catch		Sit		Booboo	
Clap		Sleep		Bye-bye	
Close		Stop		Hi, hello	
Come		Take		Me	
Cough		Throw		Night-night	
Cut		Tickle		Please	
Dance		Walk		Sesame St.	
Dinner		Want		Excuse me	
Doodoo		Wash	1	Shut up	1
drink		swim	1	Shar ap	+
Eat		swing	1	Thank you	+
Feed		PREPS		(you're)	
fly		T KET 5		welcome	
Finish		Down		What	
Fix		In		Where	
Get		Off		Why	
Give/gimme		On		You	
Go		Out		100	
Have		Under		ANIMAL	
hop		Under		SOUNDS & SOUND	
Help		Up		EFFECTS Baa	
Hit				Meow	
Hug		POSSESSION		Moo	
Jump		Mine		Shhhh	
Kick		My		Woofwoof	
Kiss		Myself		Yumyum	
Knock				Uh-oh	
Look		REJECTION AFFIRMATION		Oh-no	
Love		No		OTHER WORDS? PLEASE WRITE IN	
Lunch		Yes			
Make					
Nap		GAMES			
Open		Pattycake			
Outside		Peekaboo			
Peepee					
Push		DIS/APPEAR			
Read		Alldone/done			
Ride		Allgone/gone			
Run		Away			
		More			
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