

TEACHER INTERVIEW: LANGUAGE

Student: _____ D.O.B.: _____

Respondent: _____ Grade/Program: _____

Primary Language: _____ SLP: _____

Place a check in the appropriate column to rate student performance and return this form to the Speech-Language Pathologist.

		Yes	*No	*Sometimes
1.	Does the student follow directions for participation and transitioning between activities?			
2.	Does the student exhibit appropriate knowledge of basic concepts as compared to peers?			
3.	Does the student appear to comprehend questions asked in discussions?			
4.	Does the student ask questions for clarification or further information when he/she does not understand?			
5.	Does the student demonstrate understanding of the intent of the message?			
6.	Does the student tell stories and explain events or actions as appropriately as his/her peers?			
7.	Does the student explain and elaborate during curriculum-related discussions?			
8.	Does the student recall information presented orally?			
9.	Does the student communicate appropriately with the teacher?			
10.	Does the student initiate, maintain and terminate conversations appropriately?			
11.	Does the student establish and maintain appropriate social relationships?			
12.	Do the student's communication skills allow for participation and progress in the general curriculum?			

Please explain any "No" or "Sometimes" items and/or any additional communication skill concerns related to this student.

Respondent's Signature _____ Title _____ Date _____