

McLean County Public Schools

Behavior Observation – Speech/Language

Student: _____

Grade: _____

Date: _____

Class/Teacher Name: _____

Observer Name/Title: _____

Time: _____

Directions: During the observation, place a check mark next to the behaviors that are *observed* from the list below. These checklists are not exhaustive, so please include notes regarding additional behaviors observed, including strengths and behaviors which may interfere with the student’s learning.

I. Area(s) of Concern (check all that apply)

<input type="checkbox"/> Articulation	<input type="checkbox"/> Language	<input type="checkbox"/> Fluency/Voice
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II. Environment

<p style="text-align: center;"><u>Classroom Setting</u></p> <input type="checkbox"/> General Education <input type="checkbox"/> Resource Setting	<p style="text-align: center;"><u>Social Environment</u></p> <input type="checkbox"/> Large Group <input type="checkbox"/> Small Group <input type="checkbox"/> One other person <input type="checkbox"/> By self (no interaction)	<p style="text-align: center;"><u>Physical Environment</u></p> <input type="checkbox"/> At a table <input type="checkbox"/> At a desk <input type="checkbox"/> Other: _____
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III. Task/Activity

Task/Activity which the teacher has defined for the student: _____ _____

IV. Typical Performance

In the teacher’s judgment, was the student’s behavior/performance typical for the student? <input type="checkbox"/> Yes <input type="checkbox"/> No *If No, please explain: _____
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Articulation

<input type="checkbox"/> Speech differs from peers in conversation	<input type="checkbox"/> Peers unable to understand student’s speech in conversation
<input type="checkbox"/> Teacher cannot understand student when answering questions	<input type="checkbox"/> Peers do not accept student’s speech as normal
<input type="checkbox"/> Speech patterns distracting in conversation	<input type="checkbox"/> Teacher asks to repeat utterances
<input type="checkbox"/> Frustrated if not understood or asked to repeat	<input type="checkbox"/> Words not understood when reading aloud
<input type="checkbox"/> Makes frequent articulation errors	<input type="checkbox"/> Other: _____

Language

<input type="checkbox"/> Difficulty re-telling what has just been said	<input type="checkbox"/> Difficulty understanding directions or instructions
<input type="checkbox"/> Difficulty naming people or objects	<input type="checkbox"/> Does not follow directions during or transitioning between activities
<input type="checkbox"/> Does not exhibit appropriate knowledge of concepts as compared to peers	<input type="checkbox"/> Does not appear to comprehend questions
<input type="checkbox"/> Does not ask for clarification when he/she does not understand information	<input type="checkbox"/> Difficulty staying on topic
<input type="checkbox"/> Does not engage in social interactions/discussion activities	<input type="checkbox"/> Sentence structure is less complex compared to peers
<input type="checkbox"/> Does not provide appropriate answers to questions	<input type="checkbox"/> Difficulty in explaining things (e.g. feelings, ideas) due to use of imprecise language and limited vocabulary
<input type="checkbox"/> Refrains from answering questions in class	<input type="checkbox"/> Requires more time to respond to or react to questions and conversational comments
<input type="checkbox"/> Difficulty recalling information from a book or paragraph read aloud	<input type="checkbox"/> Poor grammar or missuses words in conversation
<input type="checkbox"/> Difficulty with pragmatic skills (e.g., eye contact, greeting, turn taking, initiating, terminating or participating in conversational exchanges; understands the relationship between speaker and listener staying on topic, making inferences based on speaker’s verbal and nonverbal cues)	<input type="checkbox"/> Difficulty with phonemic awareness tasks (e.g., saying initial sounds, saying sounds of words, blending sounds, phoneme segmentation, phoneme deletion, rhyming)
<input type="checkbox"/> Other: _____	

