

The MacArthur Communicative Developmental Inventory For American Sign Language for Children 8 to 36 Months

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Today's date 5/25/93
Child's Birthdate 12/7/91
Male ☒ Female ☐
Age 17 mos ^{ok}

Is your child deaf? Yes ☒ No ☐ When did he/she become deaf? at birth
What was the cause? hereditary (5th on paternal, 4th on Maternal)
Any deaf brothers or sisters? Yes ☒ No ☐ If yes, how old? 4 yrs old
Is mother deaf? Yes ☒ No ☐ Are mother's parents deaf? Yes ☒ No ☐
Is father deaf? Yes ☒ No ☐ Are father's parents deaf? Yes ☒ No ☐
Any other deaf relatives? All except uncle & few cousins
What language does your child use at home? ASL
Which hand does your child prefer for signing? L ☐ R ☐ both For eating? L ☐ R ☐ both
For rolling or throwing a ball? L ☐ R ☐ both

Early Understanding

Before children begin to sign, they understand what signs mean. They respond to people signing familiar signs and phrases. Below are some examples of phrases. Does your child do any of these?

1. Respond to his/her name sign? Yes ☒ No ☐
2. Respond to NO or FINISH by stopping what he/she is doing? Yes ☒ No ☐
3. Look for mommy/daddy if you sign WHERE MOMMY/DADDY? Yes ☒ No ☐

In the list below, make an X by the sign phrases that your child understands.

BE-CAREFUL <input checked="" type="checkbox"/>	GET-UP <input checked="" type="checkbox"/>	SPIT IT OUT <input checked="" type="checkbox"/>
BRING-ME <input checked="" type="checkbox"/>	GIVE-TO MOMMY <input checked="" type="checkbox"/>	TIME GO BYE-BYE <input checked="" type="checkbox"/>
CHANGE DIAPER <input checked="" type="checkbox"/>	GIVE-ME HUG <input type="checkbox"/>	THROW BALL <input checked="" type="checkbox"/>
COME-HERE <input checked="" type="checkbox"/>	GIVE-ME KISS <input checked="" type="checkbox"/>	YOU HUNGRY? <input checked="" type="checkbox"/>
DADDY/MOMMY HOME <input checked="" type="checkbox"/>	GOOD GIRL/BOY <input checked="" type="checkbox"/>	YOU TIRED/SLEEPY? <input checked="" type="checkbox"/>
DON'T TOUCH/NO TOUCH <input checked="" type="checkbox"/>	OPEN YOUR MOUTH <input checked="" type="checkbox"/>	YOU-WANT GO? <input type="checkbox"/>
FINISH <input checked="" type="checkbox"/>	SIT-DOWN <input checked="" type="checkbox"/>	YOU-WANT MORE? <input checked="" type="checkbox"/>

Nouns = 47 - 9 - 1 = 37 63%
Verbs = 18 + 2 = 20 27%

Entered 7-12-93 IAP

5/20/93

-1-

Version 2.0

closed = 0

0

75 produced

Vocabulary Checklist

Please look through the list of signs below. If your child understands a sign, but doesn't use it yet, put an X in the box. If your child understands and uses a sign, put an X in the circle. Your child may not yet use the "correct" adult sign for a word, but may use a "baby" sign. Even if your child uses a baby sign please put an X in the circle. Don't worry if your child only knows a few signs now because this is a collection of signs from many children at different ages.

Animals							
If your child understands a sign but does not yet use it, check the <input type="checkbox"/> but not the O.							
If your child understands <i>and</i> uses a sign, check the O but not the <input type="checkbox"/> .							
ALLIGATOR	<input type="checkbox"/> O	DEER	<input checked="" type="checkbox"/> O	HEN	<input type="checkbox"/> O	SKUNK	<input type="checkbox"/> O
ANIMAL	<input type="checkbox"/> O	DOG	<input type="checkbox"/> O	HORSE	<input type="checkbox"/> O	SNAKE	<input checked="" type="checkbox"/> O
ANT/BUG	<input checked="" type="checkbox"/> O	DONKEY	<input type="checkbox"/> O	LION	<input checked="" type="checkbox"/> O	SPIDER	<input checked="" type="checkbox"/> O
BEAR	<input type="checkbox"/> O	DUCK	<input type="checkbox"/> O	MONKEY	<input checked="" type="checkbox"/> O	SQUIRREL	<input type="checkbox"/> O
BEE	<input type="checkbox"/> O	ELEPHANT	<input checked="" type="checkbox"/> O	MOUSE	<input type="checkbox"/> O	TIGER	<input type="checkbox"/> O
BIRD/CHICKEN	<input type="checkbox"/> O	FISH	<input type="checkbox"/> O	OWL	<input type="checkbox"/> O	TURKEY	<input type="checkbox"/> O
BUNNY/RABBIT	<input type="checkbox"/> O	FOX	<input type="checkbox"/> O	PIG	<input type="checkbox"/> O	TURTLE	<input checked="" type="checkbox"/> O
BUTTERFLY	<input type="checkbox"/> O	FROG	<input checked="" type="checkbox"/> O	ROOSTER	<input type="checkbox"/> O	WOLF	<input type="checkbox"/> O
CAT	<input type="checkbox"/> O	GIRAFFE	<input checked="" type="checkbox"/> O	SHEEP	<input type="checkbox"/> O	ZEBRA	<input type="checkbox"/> O
COW	<input type="checkbox"/> O						

Clothing							
If your child understands a sign but does not yet use it, check the <input type="checkbox"/> but not the O.							
If your child understands <i>and</i> uses a sign, check the O but not the <input type="checkbox"/> .							
BELT	<input type="checkbox"/> O	EARRING	<input checked="" type="checkbox"/> O	PANTS	<input checked="" type="checkbox"/> O	SOCK	<input checked="" type="checkbox"/> O
BIB	<input type="checkbox"/> O	GLASSES	<input type="checkbox"/> O	SANDAL	<input type="checkbox"/> O	SWEATER	<input type="checkbox"/> O
BOOT	<input type="checkbox"/> O	GLOVES	<input type="checkbox"/> O	SCARF	<input type="checkbox"/> O	SWIMSUIT	<input type="checkbox"/> O
BUTTON	<input type="checkbox"/> O	HAT	<input type="checkbox"/> O	SHIRT	<input checked="" type="checkbox"/> O	UNDERPANTS	<input type="checkbox"/> O
COAT/JACKET	<input checked="" type="checkbox"/> O	HEARING AID	<input type="checkbox"/> O	SHOE	<input type="checkbox"/> O	WRISTWATCH	<input type="checkbox"/> O
DIAPER	<input type="checkbox"/> O	NECKLACE	<input type="checkbox"/> O	SNOWSUIT	<input type="checkbox"/> O	ZIPPER	<input type="checkbox"/> O
DRESS/CLOTHES	<input type="checkbox"/> O	PAJAMAS	<input checked="" type="checkbox"/> O				

Signs About Time							
If your child understands a sign but does not yet use it, check the <input type="checkbox"/> but not the O.							
If your child understands <i>and</i> uses a sign, check the O but not the <input type="checkbox"/> .							
AFTER	<input type="checkbox"/> O	MORNING	<input type="checkbox"/> O	SOON	<input type="checkbox"/> O	TOMORROW	<input type="checkbox"/> O
BEFORE	<input type="checkbox"/> O	NIGHT	<input type="checkbox"/> O	TIME	<input type="checkbox"/> O	TONIGHT	<input type="checkbox"/> O
DAY	<input type="checkbox"/> O	NOT-YET	<input type="checkbox"/> O	TODAY	<input type="checkbox"/> O	YESTERDAY	<input type="checkbox"/> O
LATER	<input type="checkbox"/> O	NOW	<input type="checkbox"/> O				

Action Signs

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

AWAY	<input type="checkbox"/>	<input type="radio"/>	FEED	<input type="checkbox"/>	<input type="radio"/>	LOVE	<input type="checkbox"/>	<input type="radio"/>	SLIDE	<input type="checkbox"/>	<input type="radio"/>
BITE	<input type="checkbox"/>	<input checked="" type="radio"/>	FIND	<input checked="" type="checkbox"/>	<input type="radio"/>	MAKE	<input type="checkbox"/>	<input type="radio"/>	SMILE	<input type="checkbox"/>	<input type="radio"/>
BLOW	<input type="checkbox"/>	<input type="radio"/>	FINISH	<input type="checkbox"/>	<input checked="" type="radio"/>	NEED	<input type="checkbox"/>	<input type="radio"/>	SPILL	<input type="checkbox"/>	<input type="radio"/>
BREAK	<input type="checkbox"/>	<input checked="" type="radio"/>	FIX	<input type="checkbox"/>	<input type="radio"/>	OPEN	<input type="checkbox"/>	<input checked="" type="radio"/>	STAND	<input checked="" type="checkbox"/>	<input checked="" type="radio"/>
BRING/CARRY	<input checked="" type="checkbox"/>	<input type="radio"/>	GET/TAKE	<input checked="" type="checkbox"/>	<input type="radio"/>	PAINT	<input checked="" type="checkbox"/>	<input type="radio"/>	STAY	<input type="checkbox"/>	<input type="radio"/>
BUILD	<input checked="" type="checkbox"/>	<input type="radio"/>	GET-A-SHOT	<input type="checkbox"/>	<input type="radio"/>	PICK/CHOOSE	<input type="checkbox"/>	<input type="radio"/>	STOP	<input type="checkbox"/>	<input type="radio"/>
BUY	<input type="checkbox"/>	<input type="radio"/>	GIVE	<input checked="" type="checkbox"/>	<input type="radio"/>	PLAY	<input type="checkbox"/>	<input checked="" type="radio"/>	SWIM	<input type="checkbox"/>	<input type="radio"/>
CATCH	<input checked="" type="checkbox"/>	<input type="radio"/>	GO	<input type="checkbox"/>	<input checked="" type="radio"/>	POUR	<input type="checkbox"/>	<input type="radio"/>	SWING	<input type="checkbox"/>	<input checked="" type="radio"/>
CHASE	<input type="checkbox"/>	<input type="radio"/>	HAVE	<input type="checkbox"/>	<input type="radio"/>	PULL	<input checked="" type="checkbox"/>	<input type="radio"/>	TAKE-PILL	<input type="checkbox"/>	<input type="radio"/>
CHAT	<input type="checkbox"/>	<input type="radio"/>	HEAR	<input checked="" type="checkbox"/>	<input type="radio"/>	PUSH	<input checked="" type="checkbox"/>	<input type="radio"/>	TALK	<input type="checkbox"/>	<input type="radio"/>
CLAP	<input type="checkbox"/>	<input checked="" type="radio"/>	HELP	<input type="checkbox"/>	<input type="radio"/>	PUT	<input type="checkbox"/>	<input type="radio"/>	TASTE	<input type="checkbox"/>	<input type="radio"/>
CLEAN	<input type="checkbox"/>	<input type="radio"/>	HIDE	<input type="checkbox"/>	<input type="radio"/>	READ	<input checked="" type="checkbox"/>	<input type="radio"/>	TEACH	<input type="checkbox"/>	<input type="radio"/>
CLIMB	<input type="checkbox"/>	<input checked="" type="radio"/>	HIT	<input checked="" type="checkbox"/>	<input type="radio"/>	RIDE-IN	<input checked="" type="checkbox"/>	<input type="radio"/>	TEAR/RIP	<input type="checkbox"/>	<input type="radio"/>
CLOSE	<input checked="" type="checkbox"/>	<input type="radio"/>	HOLD	<input checked="" type="checkbox"/>	<input type="radio"/>	RUN	<input type="checkbox"/>	<input type="radio"/>	TELL	<input type="checkbox"/>	<input type="radio"/>
COOK	<input checked="" type="checkbox"/>	<input type="radio"/>	HUG	<input type="checkbox"/>	<input type="radio"/>	SAY	<input type="checkbox"/>	<input type="radio"/>	THINK	<input type="checkbox"/>	<input type="radio"/>
CRY	<input type="checkbox"/>	<input checked="" type="radio"/>	HURRY	<input checked="" type="checkbox"/>	<input type="radio"/>	SEARCH-FOR	<input type="checkbox"/>	<input type="radio"/>	THROW	<input type="checkbox"/>	<input checked="" type="radio"/>
CUT	<input type="checkbox"/>	<input type="radio"/>	JUMP	<input type="checkbox"/>	<input type="radio"/>	SEE	<input type="checkbox"/>	<input type="radio"/>	TOUCH	<input type="checkbox"/>	<input type="radio"/>
DANCE	<input checked="" type="checkbox"/>	<input type="radio"/>	KICK	<input type="checkbox"/>	<input type="radio"/>	SHAKE	<input checked="" type="checkbox"/>	<input type="radio"/>	WAIT	<input type="checkbox"/>	<input type="radio"/>
DRAW	<input type="checkbox"/>	<input type="radio"/>	KISS	<input type="checkbox"/>	<input checked="" type="radio"/>	SHARE	<input type="checkbox"/>	<input type="radio"/>	WALK	<input type="checkbox"/>	<input type="radio"/>
DRINK	<input type="checkbox"/>	<input checked="" type="radio"/>	KNOCK	<input type="checkbox"/>	<input type="radio"/>	SHOW	<input type="checkbox"/>	<input type="radio"/>	WASH	<input type="checkbox"/>	<input checked="" type="radio"/>
DROP	<input type="checkbox"/>	<input checked="" type="radio"/>	LEARN	<input type="checkbox"/>	<input type="radio"/>	SIGN	<input type="checkbox"/>	<input type="radio"/>	WATCH	<input type="checkbox"/>	<input type="radio"/>
EAT	<input type="checkbox"/>	<input checked="" type="radio"/>	LICK	<input type="checkbox"/>	<input type="radio"/>	SIT	<input type="checkbox"/>	<input checked="" type="radio"/>	WORK	<input checked="" type="checkbox"/>	<input type="radio"/>
ENTER	<input type="checkbox"/>	<input type="radio"/>	LIKE	<input type="checkbox"/>	<input type="radio"/>	SKATE	<input type="checkbox"/>	<input type="radio"/>			
FALL	<input checked="" type="checkbox"/>	<input type="radio"/>	LOOK	<input checked="" type="checkbox"/>	<input type="radio"/>	SLEEP	<input type="checkbox"/>	<input checked="" type="radio"/>			

18

Furniture And Rooms

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

BASEMENT	<input type="checkbox"/>	<input type="radio"/>	DOOR	<input type="checkbox"/>	<input type="radio"/>	MIRROR	<input checked="" type="checkbox"/>	<input type="radio"/>	SHOWER	<input type="checkbox"/>	<input type="radio"/>
BATHROOM/TOILET	<input checked="" type="checkbox"/>	<input type="radio"/>	DRAWER	<input type="checkbox"/>	<input type="radio"/>	REFRIGERATOR	<input type="checkbox"/>	<input type="radio"/>	TABLE	<input type="checkbox"/>	<input type="radio"/>
BATHTUB	<input type="checkbox"/>	<input checked="" type="radio"/>	DRYER	<input type="checkbox"/>	<input type="radio"/>	ROCKING CHAIR	<input type="checkbox"/>	<input type="radio"/>	TV	<input type="checkbox"/>	<input type="radio"/>
BED	<input type="checkbox"/>	<input checked="" type="radio"/>	GARAGE	<input type="checkbox"/>	<input type="radio"/>	ROOM	<input type="checkbox"/>	<input type="radio"/>	WASH MACHINE	<input type="checkbox"/>	<input type="radio"/>
BEDROOM	<input type="checkbox"/>	<input type="radio"/>	KITCHEN	<input checked="" type="checkbox"/>	<input type="radio"/>	SHOWER	<input type="checkbox"/>	<input type="radio"/>	WINDOW	<input type="checkbox"/>	<input type="radio"/>
CLOSET	<input type="checkbox"/>	<input type="radio"/>	LIVING ROOM	<input type="checkbox"/>	<input type="radio"/>	STAIRS	<input type="checkbox"/>	<input type="radio"/>			

2

Toys

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

BALL	<input type="checkbox"/>	<input checked="" type="radio"/>	BOOK	<input type="checkbox"/>	<input checked="" type="radio"/>	PENCIL	<input type="checkbox"/>	<input type="radio"/>	ROBOT	<input type="checkbox"/>	<input type="radio"/>
BALLOON	<input type="checkbox"/>	<input checked="" type="radio"/>	DOLL	<input checked="" type="checkbox"/>	<input type="radio"/>	PRESENT/GIFT	<input type="checkbox"/>	<input type="radio"/>	TOY	<input checked="" type="checkbox"/>	<input type="radio"/>
BAT	<input type="checkbox"/>	<input type="radio"/>	GAME	<input type="checkbox"/>	<input type="radio"/>	PUZZLE	<input type="checkbox"/>	<input type="radio"/>			3

People

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

AUNT	<input type="checkbox"/>	<input checked="" type="radio"/>	COWBOY	<input type="checkbox"/>	<input type="radio"/>	GRANDPA	<input type="checkbox"/>	<input checked="" type="radio"/>	PEOPLE	<input type="checkbox"/>	<input type="radio"/>
BABY	<input type="checkbox"/>	<input checked="" type="radio"/>	COUSIN	<input type="checkbox"/>	<input type="radio"/>	INDIAN	<input type="checkbox"/>	<input type="radio"/>	POLICE	<input type="checkbox"/>	<input type="radio"/>
BABYSITTER	<input type="checkbox"/>	<input type="radio"/>	DADDY	<input type="checkbox"/>	<input checked="" type="radio"/>	MAILMAN	<input type="checkbox"/>	<input type="radio"/>	SANTA CLAUS	<input type="checkbox"/>	<input type="radio"/>
BOY	<input type="checkbox"/>	<input type="radio"/>	DOCTOR	<input type="checkbox"/>	<input type="radio"/>	MAN	<input type="checkbox"/>	<input type="radio"/>	SISTER	<input type="checkbox"/>	<input type="radio"/>
BROTHER	<input type="checkbox"/>	<input type="radio"/>	FIREMAN	<input type="checkbox"/>	<input type="radio"/>	MOMMY	<input type="checkbox"/>	<input checked="" type="radio"/>	TEACHER	<input type="checkbox"/>	<input type="radio"/>
CHILD/KID	<input type="checkbox"/>	<input type="radio"/>	FRIEND	<input type="checkbox"/>	<input type="radio"/>	MONSTER	<input type="checkbox"/>	<input type="radio"/>	UNCLE	<input type="checkbox"/>	<input type="radio"/>
Child's Own Name	<input type="checkbox"/>	<input checked="" type="radio"/>	GIRL	<input type="checkbox"/>	<input type="radio"/>	NAME SIGNS	<input type="checkbox"/>	<input checked="" type="radio"/>	WOMAN	<input type="checkbox"/>	<input type="radio"/>
CLOWN	<input type="checkbox"/>	<input checked="" type="radio"/>	GRANDMA	<input type="checkbox"/>	<input checked="" type="radio"/>	NURSE	<input type="checkbox"/>	<input type="radio"/>			9

Food And Drink

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

APPLE	<input checked="" type="checkbox"/>	<input type="radio"/>	CORN	<input type="checkbox"/>	<input type="radio"/>	LOLLIPOP	<input type="checkbox"/>	<input type="radio"/>	SAUCE	<input type="checkbox"/>	<input type="radio"/>
BAGEL	<input type="checkbox"/>	<input type="radio"/>	CRACKER	<input type="checkbox"/>	<input checked="" type="radio"/>	MEAT	<input type="checkbox"/>	<input type="radio"/>	SODA/POP	<input type="checkbox"/>	<input type="radio"/>
BANANA	<input type="checkbox"/>	<input checked="" type="radio"/>	CREAM CHEESE	<input type="checkbox"/>	<input type="radio"/>	MILK	<input type="checkbox"/>	<input checked="" type="radio"/>	SOUP	<input type="checkbox"/>	<input type="radio"/>
BEANS	<input type="checkbox"/>	<input type="radio"/>	DONUT	<input type="checkbox"/>	<input type="radio"/>	NUT	<input type="checkbox"/>	<input type="radio"/>	SPAGHETTI	<input type="checkbox"/>	<input type="radio"/>
BREAD	<input type="checkbox"/>	<input type="radio"/>	EGG	<input type="checkbox"/>	<input type="radio"/>	ORANGE	<input type="checkbox"/>	<input type="radio"/>	STRAWBERRY	<input type="checkbox"/>	<input type="radio"/>
BUTTER	<input type="checkbox"/>	<input type="radio"/>	FRENCH FRIES	<input type="checkbox"/>	<input type="radio"/>	PANCAKE	<input type="checkbox"/>	<input type="radio"/>	SYRUP	<input type="checkbox"/>	<input type="radio"/>
CAKE	<input type="checkbox"/>	<input type="radio"/>	GRAPES	<input type="checkbox"/>	<input type="radio"/>	PEANUT BUTTER	<input type="checkbox"/>	<input type="radio"/>	TEA	<input type="checkbox"/>	<input type="radio"/>
CANDY	<input type="checkbox"/>	<input checked="" type="radio"/>	GREEN BEANS	<input type="checkbox"/>	<input type="radio"/>	PIZZA	<input type="checkbox"/>	<input type="radio"/>	TOAST	<input type="checkbox"/>	<input type="radio"/>
CARROT	<input type="checkbox"/>	<input type="radio"/>	GUM	<input type="checkbox"/>	<input type="radio"/>	POPSICLE	<input type="checkbox"/>	<input type="radio"/>	TOMATO	<input type="checkbox"/>	<input type="radio"/>
CEREAL	<input type="checkbox"/>	<input type="radio"/>	HAMBURGER	<input type="checkbox"/>	<input type="radio"/>	POTATO	<input type="checkbox"/>	<input type="radio"/>	VANILLA	<input type="checkbox"/>	<input type="radio"/>
CHEESE	<input checked="" type="checkbox"/>	<input type="radio"/>	HOT DOG	<input type="checkbox"/>	<input type="radio"/>	POTATO CHIPS	<input type="checkbox"/>	<input type="radio"/>	VITAMINS	<input type="checkbox"/>	<input type="radio"/>
CHOCOLATE	<input type="checkbox"/>	<input type="radio"/>	ICE	<input type="checkbox"/>	<input type="radio"/>	PUMPKIN	<input type="checkbox"/>	<input type="radio"/>	WAFFLE	<input type="checkbox"/>	<input type="radio"/>
COFFEE	<input type="checkbox"/>	<input type="radio"/>	ICE CREAM	<input type="checkbox"/>	<input type="radio"/>	SALAD	<input type="checkbox"/>	<input type="radio"/>	WATER	<input type="checkbox"/>	<input type="radio"/>
COKE	<input type="checkbox"/>	<input type="radio"/>	JELLY	<input type="checkbox"/>	<input type="radio"/>	SALT	<input type="checkbox"/>	<input type="radio"/>	WATERMELON	<input type="checkbox"/>	<input type="radio"/>
COOKIE	<input type="checkbox"/>	<input checked="" type="radio"/>	JUICE	<input checked="" type="checkbox"/>	<input type="radio"/>	SANDWICH	<input type="checkbox"/>	<input type="radio"/>			5

Prepositions And Locations

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

ABOVE	<input type="checkbox"/> <input type="radio"/>	FRONT	<input type="checkbox"/> <input type="radio"/>	OFF	<input type="checkbox"/> <input type="radio"/>	TO	<input type="checkbox"/> <input type="radio"/>
BACK	<input type="checkbox"/> <input type="radio"/>	HERE	<input type="checkbox"/> <input type="radio"/>	ON	<input type="checkbox"/> <input type="radio"/>	UNDER	<input type="checkbox"/> <input type="radio"/>
BEHIND	<input type="checkbox"/> <input type="radio"/>	INSIDE/IN	<input type="checkbox"/> <input type="radio"/>	OUT	<input type="checkbox"/> <input type="radio"/>	UP	<input type="checkbox"/> <input type="radio"/>
DOWN	<input type="checkbox"/> <input type="radio"/>	NEXT-TO	<input type="checkbox"/> <input type="radio"/>	OVER	<input type="checkbox"/> <input type="radio"/>	WITH	<input type="checkbox"/> <input type="radio"/>
FOR	<input type="checkbox"/> <input type="radio"/>						

Outside Things

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

BACKYARD/YARD	<input type="checkbox"/> <input type="radio"/>	HOSE	<input type="checkbox"/> <input type="radio"/>	ROCK	<input type="checkbox"/> <input type="radio"/>	STAR	<input type="checkbox"/> <input type="radio"/>
CLOUD	<input type="checkbox"/> <input type="radio"/>	LADDER	<input type="checkbox"/> <input type="radio"/>	SHOVEL	<input type="checkbox"/> <input type="radio"/>	STREET	<input type="checkbox"/> <input type="radio"/>
FLAG	<input type="checkbox"/> <input type="radio"/>	LAWN MOWER	<input type="checkbox"/> <input type="radio"/>	SNOW	<input type="checkbox"/> <input type="radio"/>	SUN	<input type="checkbox"/> <input type="radio"/>
FLOWER	<input type="checkbox"/> <input type="radio"/>	LIGHTNING	<input type="checkbox"/> <input type="radio"/>	SNOWMAN	<input type="checkbox"/> <input type="radio"/>	TREE	<input type="checkbox"/> <input checked="" type="radio"/>
FOREST	<input type="checkbox"/> <input type="radio"/>	MOON	<input type="checkbox"/> <input checked="" type="radio"/>	SPRINKLER	<input type="checkbox"/> <input type="radio"/>	WIND/WINDY	<input type="checkbox"/> <input type="radio"/>
GRASS	<input type="checkbox"/> <input type="radio"/>	RAIN	<input type="checkbox"/> <input checked="" type="radio"/>				2

Pronouns

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

HE/SHE/IT	<input type="checkbox"/> <input type="radio"/>	MYSELF	<input type="checkbox"/> <input type="radio"/>	THEIR	<input type="checkbox"/> <input type="radio"/>	YOU	<input type="checkbox"/> <input type="radio"/>
HIS/HERS	<input type="checkbox"/> <input type="radio"/>	OUR	<input type="checkbox"/> <input type="radio"/>	THEY	<input type="checkbox"/> <input type="radio"/>	YOUR	<input type="checkbox"/> <input type="radio"/>
ME	<input type="checkbox"/> <input type="radio"/>	THAT/THESE	<input type="checkbox"/> <input type="radio"/>	WE	<input type="checkbox"/> <input type="radio"/>	YOURSELF	<input type="checkbox"/> <input type="radio"/>
MINE/MY	<input type="checkbox"/> <input type="radio"/>						

Places To Go

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

BEACH	<input type="checkbox"/> <input type="radio"/>	FARM	<input type="checkbox"/> <input type="radio"/>	MOVIE	<input type="checkbox"/> <input type="radio"/>	RESTAURANT	<input type="checkbox"/> <input type="radio"/>
CAMPING	<input type="checkbox"/> <input type="radio"/>	GAS STATION	<input type="checkbox"/> <input type="radio"/>	OUTSIDE	<input type="checkbox"/> <input type="radio"/>	SCHOOL	<input checked="" type="radio"/> <input type="radio"/>
CHURCH	<input type="checkbox"/> <input type="radio"/>	HOME	<input type="checkbox"/> <input checked="" type="radio"/>	PARTY	<input type="checkbox"/> <input type="radio"/>	STORE	<input type="checkbox"/> <input type="radio"/>
CIRCUS	<input type="checkbox"/> <input type="radio"/>	HOUSE	<input type="checkbox"/> <input type="radio"/>	PICNIC	<input type="checkbox"/> <input type="radio"/>	TOWN	<input type="checkbox"/> <input type="radio"/>
COUNTRY	<input type="checkbox"/> <input type="radio"/>	McDONALD'S	<input type="checkbox"/> <input type="radio"/>	PLAYGROUND	<input type="checkbox"/> <input type="radio"/>	ZOO	1 <input type="checkbox"/> <input type="radio"/>

Question Signs

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

DO-DO	<input type="checkbox"/> <input type="radio"/>	HOW	<input type="checkbox"/> <input type="radio"/>	WHERE	<input type="checkbox"/> <input type="radio"/>	WHO	<input type="checkbox"/> <input type="radio"/>
FOR-FOR	<input type="checkbox"/> <input type="radio"/>	WHAT	<input type="checkbox"/> <input type="radio"/>	WHICH	<input type="checkbox"/> <input type="radio"/>	WHY	<input type="checkbox"/> <input type="radio"/>

Small Household Items

If your child understands a sign but does not yet use it, check the ☐ but not the ☐.

If your child understands *and* uses a sign, check the ☐ but not the ☐.

BAND-AID	<input type="checkbox"/> <input type="radio"/>	COMB	<input type="checkbox"/> <input type="radio"/>	NAPKIN	<input type="checkbox"/> <input type="radio"/>	SPOON	<input type="checkbox"/> <input type="radio"/>
BASKET	<input type="checkbox"/> <input type="radio"/>	FORK	<input type="checkbox"/> <input type="radio"/>	NEWSPAPER	<input type="checkbox"/> <input type="radio"/>	TAPE	<input type="checkbox"/> <input type="radio"/>
BLANKET	<input type="checkbox"/> <input type="radio"/>	GLASS	<input type="checkbox"/> <input type="radio"/>	PAPER	<input type="checkbox"/> <input type="radio"/>	TDD/TTY	<input type="checkbox"/> <input type="radio"/>
BOTTLE	<input type="checkbox"/> <input type="radio"/>	HAMMER	<input type="checkbox"/> <input type="radio"/>	PICTURE	<input type="checkbox"/> <input type="radio"/>	TELEPHONE	<input type="checkbox"/> <input type="radio"/>
BOWL	<input type="checkbox"/> <input type="radio"/>	KEYS	<input type="checkbox"/> <input checked="" type="radio"/>	PLANT	<input type="checkbox"/> <input type="radio"/>	TISSUE/KLEENEX	<input type="checkbox"/> <input type="radio"/>
BOX	<input type="checkbox"/> <input type="radio"/>	KNIFE	<input type="checkbox"/> <input type="radio"/>	PLATE	<input type="checkbox"/> <input type="radio"/>	TOOTHBRUSH	<input type="checkbox"/> <input type="radio"/>
BROOM	<input type="checkbox"/> <input type="radio"/>	LETTER	<input type="checkbox"/> <input type="radio"/>	PURSE	<input type="checkbox"/> <input type="radio"/>	TOWEL	<input type="checkbox"/> <input type="radio"/>
BRUSH	<input type="checkbox"/> <input type="radio"/>	MEDICINE	<input type="checkbox"/> <input type="radio"/>	RADIO	<input type="checkbox"/> <input type="radio"/>	TRASH/GARBAGE	<input type="checkbox"/> <input type="radio"/>
CAMERA	<input type="checkbox"/> <input type="radio"/>	MONEY	<input type="checkbox"/> <input type="radio"/>	SCISSORS	<input type="checkbox"/> <input type="radio"/>	VACUUM	<input type="checkbox"/> <input type="radio"/>
CENT/COIN	<input type="checkbox"/> <input type="radio"/>	MOP	<input type="checkbox"/> <input type="radio"/>	SOAP	<input type="checkbox"/> <input type="radio"/>		

Games And Routines

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BASEBALL	<input type="checkbox"/> <input type="radio"/>	BYE	<input type="checkbox"/> <input checked="" type="radio"/>	LET'S-SEE	<input type="checkbox"/> <input type="radio"/>	SHH/SHUSH	<input type="checkbox"/> <input type="radio"/>
BASKETBALL	<input type="checkbox"/> <input checked="" type="radio"/>	CALL(TDD)	<input type="checkbox"/> <input type="radio"/>	LUNCH	<input type="checkbox"/> <input type="radio"/>	SHOPPING	<input type="checkbox"/> <input type="radio"/>
BATH	<input type="checkbox"/> <input checked="" type="radio"/>	DINNER	<input type="checkbox"/> <input type="radio"/>	NAP	<input type="checkbox"/> <input checked="" type="radio"/>	STORY	<input type="checkbox"/> <input type="radio"/>
BIRTHDAY	<input type="checkbox"/> <input type="radio"/>	FOOTBALL	<input type="checkbox"/> <input type="radio"/>	NO	<input type="checkbox"/> <input checked="" type="radio"/>	THANK-YOU	<input type="checkbox"/> <input type="radio"/>
BOWLING	<input type="checkbox"/> <input type="radio"/>	GOLF	<input type="checkbox"/> <input type="radio"/>	PEE/BM	<input type="checkbox"/> <input checked="" type="radio"/>	WASH-FACE	<input type="checkbox"/> <input type="radio"/>
BREAKFAST	<input type="checkbox"/> <input type="radio"/>	HI	<input type="checkbox"/> <input type="radio"/>	PEEKABOO	<input type="checkbox"/> <input type="radio"/>	WASH-HANDS	<input type="checkbox"/> <input checked="" type="radio"/>
BRUSH-HAIR	<input type="checkbox"/> <input checked="" type="radio"/>	I-LOVE-YOU	<input type="checkbox"/> <input type="radio"/>	PLEASE	<input type="checkbox"/> <input type="radio"/>	YES	<input type="checkbox"/> <input checked="" type="radio"/>

Vehicles

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AIRPLANE	<input type="checkbox"/> <input checked="" type="radio"/>	BOAT	<input type="checkbox"/> <input checked="" type="radio"/>	HELICOPTER	<input type="checkbox"/> <input type="radio"/>	TRAIN	<input type="checkbox"/> <input type="radio"/>
AMBULANCE	<input type="checkbox"/> <input type="radio"/>	BUS	<input type="checkbox"/> <input type="radio"/>	MOTORCYCLE	<input type="checkbox"/> <input type="radio"/>	TRUCK	<input type="checkbox"/> <input type="radio"/>
BICYCLE	<input type="checkbox"/> <input type="radio"/>	FIRETRUCK	<input type="checkbox"/> <input type="radio"/>	SLED	<input type="checkbox"/> <input type="radio"/>		

Descriptive SignsIf your child understands a sign but does not yet use it, check the ☐ but not the ☐.If your child understands *and* uses a sign, check the ☐ but not the ☐.

ANGRY	<input type="checkbox"/> <input type="radio"/>	EMPTY	<input type="checkbox"/> <input type="radio"/>	LAST	<input type="checkbox"/> <input type="radio"/>	SICK	<input checked="" type="checkbox"/> <input type="radio"/>
BAD	<input type="checkbox"/> <input type="radio"/>	FAST	<input type="checkbox"/> <input type="radio"/>	LITTLE	<input type="checkbox"/> <input type="radio"/>	SILLY	<input type="checkbox"/> <input type="radio"/>
BETTER	<input type="checkbox"/> <input type="radio"/>	FINE	<input type="checkbox"/> <input type="radio"/>	LONG	<input type="checkbox"/> <input type="radio"/>	SLEEPY	<input type="checkbox"/> <input type="radio"/>
BIG	<input type="checkbox"/> <input type="radio"/>	FIRST	<input type="checkbox"/> <input type="radio"/>	NEW	<input type="checkbox"/> <input type="radio"/>	SLOW	<input type="checkbox"/> <input type="radio"/>
BLACK	<input type="checkbox"/> <input type="radio"/>	FULL	<input type="checkbox"/> <input type="radio"/>	NICE	<input type="checkbox"/> <input type="radio"/>	SOFT	<input type="checkbox"/> <input type="radio"/>
BLUE	<input type="checkbox"/> <input type="radio"/>	FUNNY	<input type="checkbox"/> <input type="radio"/>	NOISY	<input checked="" type="checkbox"/> <input type="radio"/>	STICKY	<input type="checkbox"/> <input type="radio"/>
BROWN	<input type="checkbox"/> <input type="radio"/>	GOOD	<input checked="" type="checkbox"/> <input type="radio"/>	OLD	<input type="checkbox"/> <input type="radio"/>	STUCK	<input type="checkbox"/> <input type="radio"/>
CAREFUL	<input checked="" type="checkbox"/> <input type="radio"/>	GREEN	<input type="checkbox"/> <input type="radio"/>	PINK	<input type="checkbox"/> <input type="radio"/>	THIRSTY	<input type="checkbox"/> <input type="radio"/>
COLD	<input checked="" type="checkbox"/> <input type="radio"/>	HAPPY	<input type="checkbox"/> <input type="radio"/>	POOR	<input type="checkbox"/> <input type="radio"/>	TIRED	<input type="checkbox"/> <input type="radio"/>
CRAZY	<input type="checkbox"/> <input type="radio"/>	HARD	<input type="checkbox"/> <input type="radio"/>	PRETTY	<input type="checkbox"/> <input type="radio"/>	UPSET	<input type="checkbox"/> <input type="radio"/>
CUTE	<input type="checkbox"/> <input type="radio"/>	HEAVY	<input type="checkbox"/> <input type="radio"/>	PURPLE	<input type="checkbox"/> <input type="radio"/>	WET	<input type="checkbox"/> <input type="radio"/>
DARK	<input type="checkbox"/> <input type="radio"/>	HIGH	<input type="checkbox"/> <input type="radio"/>	QUIET	<input type="checkbox"/> <input type="radio"/>	WHITE	<input type="checkbox"/> <input type="radio"/>
DEAF	<input type="checkbox"/> <input type="radio"/>	HOT	<input type="checkbox"/> <input type="radio"/>	RED	<input type="checkbox"/> <input type="radio"/>	WINDY	<input type="checkbox"/> <input type="radio"/>
DELICIOUS	<input type="checkbox"/> <input type="radio"/>	HUNGRY	<input type="checkbox"/> <input type="radio"/>	SAD	<input type="checkbox"/> <input type="radio"/>	YELLOW	<input type="checkbox"/> <input type="radio"/>
DIRTY	<input type="checkbox"/> <input checked="" type="radio"/>	HURT	<input type="checkbox"/> <input checked="" type="radio"/>	SCARED	<input type="checkbox"/> <input type="radio"/>	YUCKY	<input checked="" type="checkbox"/> <input type="radio"/>
DRY	<input type="checkbox"/> <input type="radio"/>						

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Helping VerbsIf your child understands a sign but does not yet use it, check the ☐ but not the ☐.If your child understands *and* uses a sign, check the ☐ but not the ☐.

CAN	DON'T-LIKE	LET-ME-SEE	WILL
CAN'T	DON'T-WANT	WANT	

QuantifiersIf your child understands a sign but does not yet use it, check the ☐ but not the ☐.If your child understands *and* uses a sign, check the ☐ but not the ☐.

A LOT/MUCH	<input type="checkbox"/> <input type="radio"/>	MANY	<input type="checkbox"/> <input type="radio"/>	NOT	<input type="checkbox"/> <input type="radio"/>	SAME	<input type="checkbox"/> <input type="radio"/>
ALL	<input type="checkbox"/> <input type="radio"/>	MORE	<input type="checkbox"/> <input type="radio"/>	NUMBERS	<input type="checkbox"/> <input type="radio"/>	SOME	<input type="checkbox"/> <input type="radio"/>
GONE/ALL-GONE	<input type="checkbox"/> <input type="radio"/>	NONE	<input type="checkbox"/> <input type="radio"/>	OTHER	<input type="checkbox"/> <input type="radio"/>		

Connecting SignsIf your child understands a sign but does not yet use it, check the ☐ but not the ☐.If your child understands *and* uses a sign, check the ☐ but not the ☐.

AND	<input type="checkbox"/> <input type="radio"/>	BECAUSE	<input type="checkbox"/> <input type="radio"/>	BUT	<input type="checkbox"/> <input type="radio"/>	IF/SUPPOSE	<input type="checkbox"/> <input type="radio"/>
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ASL_001

Does your baby combine signs to make sentences? Yes ☐ No ☒

If yes, please write examples of your child's three longest ASL sentences:

Does your child try to fingerspell words? Yes ☐ No ☒

Does your child fingerspell letters? Yes ☐ No ☒

When your child asks "WH" questions (who, where, what, when)

does he/she: 1. lower his/her eyebrows? Yes ☐ No ☐ Sometimes ☐

or 2. raise his/her eyebrows? Yes ☐ No ☐ Sometimes ☐

For Example: WHERE DADDY? (Eyebrows up or down)

When your child asks "YES/NO" questions, does he/she:

1. lower his/her eyebrows? Yes ☐ No ☐ Sometimes ☐

or 2. raise his/her eyebrows? Yes ☐ No ☐ Sometimes ☐

For Example: YOU HUNGRY? (Eyebrows up or down)