

# Questionnaire Assessment

Answer the following questions considering the child of 2 years of age

\* Indicates required question

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1. Email \*

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2. Does the child experience joy when a goal is achieved?(smile) \*

*Mark only one oval.*

☐ Yes

☐ No

3. Can the child imitate? \*

*Mark only one oval.*

☐ Yes

☐ No

4. Does the child mouth everything? \*

*Mark only one oval.*

☐ Yes

☐ No

5. Does the child know fear of danger? \*

*Mark only one oval.*

☐ Yes

☐ No

6. Does the child drink from glass/cup? \*

*Mark only one oval.*

☐ Yes

☐ No

7. Does the child give eye contact? \*

*Mark only one oval.*

☐ Yes

☐ No

8. Does the child have neck control? \*

*Mark only one oval.*

☐ Yes

☐ No

9. Can the child sit? \*

*Mark only one oval.*

☐ Yes

☐ No

10. Does the child like to mingle with other kids? \*

*Mark only one oval.*

☐ Yes

☐ No

11. Can the child hold any object? \*

*Mark only one oval.*

☐ Yes

☐ No

12. Can the child walk independently? \*

*Mark only one oval.*

☐ Yes

☐ No

13. Can the child run? \*

*Mark only one oval.*

☐ Yes

☐ No

14. Can the child follow simple instructions (clap)? \*

*Mark only one oval.*

☐ Yes

☐ No

15. Does the child indicate his wants (pointing)? \*

*Mark only one oval.*

- ☐ Yes  
☐ No

16. Is the child verbal (one word)? \*

*Mark only one oval.*

- ☐ Yes  
☐ No

17. Does the child communicate meaningfully (complete one sentence)? \*

*Mark only one oval.*

- ☐ Yes  
☐ No

18. Does the child eat finger foods on his/her own? \*

*Mark only one oval.*

- ☐ Yes  
☐ No

19. Can the child sucks liquid from a glass through a straw? \*

*Mark only one oval.*

- ☐ Yes  
☐ No

20. Can the child turn towards the person when his/her name is called out? \*

*Mark only one oval.*

☐ Yes

☐ No

21. Does the child say/wave Hi when meeting other adults/teachers? \*

*Mark only one oval.*

☐ Yes

☐ No

22. Can the child wash his/her hands on their own? \*

*Mark only one oval.*

☐ Yes

☐ No

23. Does the child identify his/her shoes? \*

*Mark only one oval.*

☐ Yes

☐ No

24. Does the child chews food items by munching? \*

*Mark only one oval.*

☐ Yes

☐ No

25. Does the child snatch food items or desirable items at a shop? \*

*Mark only one oval.*

☐ Yes

☐ No

26. Does the child spontaneously open the mouth in response to food? \*

*Mark only one oval.*

☐ Yes

☐ No

27. Does the child pull hair of himself or others? \*

*Mark only one oval.*

☐ Yes

☐ No

28. Can the child do different posture (namaste)? \*

*Mark only one oval.*

☐ Yes

☐ No

29. Is the child potty trained? \*

*Mark only one oval.*

☐ Yes

☐ No

30. Does the child exhibit control over drooling (saliva coming out of mouth)? \*

*Mark only one oval.*

☐ Yes

☐ No

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