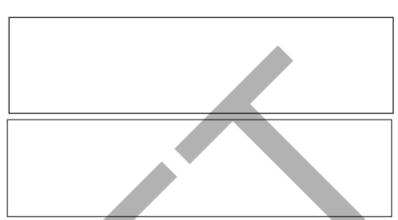
EARLY DEVELOPMENT INSTRUMENT A Population-Based Measure for Communities Ontario 2011/2012



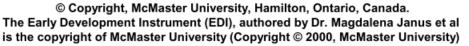


Please fill in the circles like this ● or **※** NOT **※** Please use a blue or black ballpoint pen.



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or missing, please make changes clea		
1.Class Assignment	6. Date of Completion: dd / mm / yy 0 00 00 00 1 00 00 00 2 00 00 00 3 00 00 00 4 00 00 00 5 00 00 00 6 00 00 00 7 00 00 00 8 00 00 00 9 00 00 00	12. Child's First Language(s): Caption English only Other only English & French English & Other French & Other
6 00 00 00 7 00 00 00 8 00 00 00 9 00 00 00	7. Identified Special Needs: O Yes O No	Other Other (Refer to Guide for language codes in "other" categories. If you do not know the "other" language code, use "000".)
3. Sex: OF OM4. Postal Code:	8. Child considered ESL:Yes	 13. Communicates adequately in his/her first language: Yes O No O Don't know 14. Student Status: O in class more than 1 month (See Guide) O in class less than 1 month
5. Class Type: O SK O JK/SK O JK/SK/1 O SK/1	 10. Other Immersion: Yes O No 11. Aboriginal: Yes O No O Don't Know 	(Do not complete) O moved out of class O moved out of school O other 15. Student is repeating this grade:
○ Other	(North American Indian, Métis, or Inuit)	○ Yes ○ No







Section A - Physical Well-being

1.	1. About how many regular days (see Guide) has this child been absent since the beginning of school in the fall? Number absent					
	nce the start of school in the fall, has this child metimes (more than once) arrived:		yes	no A	dor kno	
2.	over- or underdressed for school-related activities		0	0	C)
3.	too tired/sick to do school work		0	0	C	
4.	late		0	0	C	
5.	hungry		0	0	С)
W c	ould you say that this child: is independent in washroom habits most of the time	X		yes ^	no ^	don't know
7.	shows an established hand preference (right vs. left or vice ver	sa)		0	0	0
8.	is well coordinated (i.e., moves without running into or tripping of	over things)	,	0	0	0
	pw would you rate this child's: proficiency at holding a pen, crayons, or a brush	very good/ good ^	average ^	very	oor/ poor ^	don't know
10.	ability to manipulate objects	0	0	(Э	0
11.	ability to climb stairs	0	0	(— Э	0
12.	level of energy throughout the school day	0	0	())	0
13.	overall physical development	0	0	(<u> </u>	0

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Section B - Language and Cognitive Skills

	Λ.	very poor	know
0	0	ô	^
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
	yes	no k	don't know
	ô		Ô
	0	0	0
d material)	0	0	0
	0	0	0
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ection)	0	0	0
	0	0	0
	0	0	0
_	0 0 0	O O O O O O O O O O O O O O O O O O O	O O O O O O O O O O O O O O O O O O O



Would you say that this child:	yes ^	no	don't know
22 is able to write simple contended			^
23. is able to write simple sentences		0	0
24. is able to remember things easily	0	0	0
25. is interested in mathematics	0	0	0
26. is interested in games involving numbers	0	0	0
27. is able to sort and classify objects by a common characteristic (e.g., shape, colour, size)	0	0	0
28. is able to use one-to-one correspondence	0	0	0
29. is able to count to 20	0	0	0
30. is able to recognize numbers 1 - 10	0	0	0
31. is able to say which number is bigger of the two	0	0	0
32. is able to recognize geometric shapes (e.g., triangle, circle, square)	0	0	0
33. understands simple time concepts (e.g., today, summer, bedtime)	0	0	0
34. demonstrates special numeracy skills or talents	0	0	0
35. demonstrates special literacy skills or talents	0	0	0
36. demonstrates special skills or talents in arts	0	0	0
37. demonstrates special skills or talents in music	0	0	0
38. demonstrates special skills or talents in athletics/dance	0	0	0
39. demonstrates special skills or talents in problem solving in a creative way	0	0	0
40. demonstrates special skills or talents in other areas If yes, please specify:	0	0	0

Se	ction C - Social and Emotional Development]					
Ho	v would you rate this child's:	very good/ good ^	average ^	poor/ very poor	don't know		
1.	overall social/emotional development	0	0	0	Ö		
2.	ability to get along with peers	0	0	0	0		
Below is a list of statements that describe some of the feelings and behaviours of children. For each							

statement, please fill in the circle that best describes this child now or within the past six months.

Would you say that this child:	often or very true	sometimes or somewhat true	never or not true	don't know
plays and works cooperatively with other children at the level appropriate for his/her age	0	0	0	0
4. is able to play with various children	0	0	0	0
5. follows rules and instructions	0	0	0	0
6. respects the property of others	0	0	0	0
7. demonstrates self-control	0	0	0	0
8. shows self-confidence	0	0	0	0
demonstrates respect for adults	0	0	0	0
10. demonstrates respect for other children	0	0	0	0
11. accepts responsibility for actions	0	0	0	0
12. listens attentively	0	0	0	0
13. follows directions	0	0	0	0
14. completes work on time	0	0	0	0
15. works independently	0	0	0	0
16. takes care of school materials	0	0	0	0
17. works neatly and carefully	0	0	0	0
18. is curious about the world	0	0	0	0
19. is eager to play with a new toy	0	0	0	0
20. is eager to play a new game	0	0	0	0
21. is eager to play with/read a new book	0	0	0	0



Section C - Social and Emotional Development

Wou	ld you say that this child:	often or very true	sometimes or somewhat true	never or not true	don't know
22.	is able to solve day-to-day problems by him/herself	ô	Ô	ô	<u> </u>
23.	is able to follow one-step instructions	0	0	0	0
24.	is able to follow class routines without reminders	0	0	0	
25.	is able to adjust to changes in routines	0	0	0	0
26.	answers questions showing knowledge about the world (e.g., leaves fall in the autumn, apple is a fruit, dogs bark)	0	0	0	0
27.	shows tolerance to someone who made a mistake (e.g., when a child gives a wrong answer to a question posed by the teacher)	6	0	0	0
28.	will try to help someone who has been hurt	0	0	0	0
29.	volunteers to help clear up a mess someone else has made	0	0	0	
30.	if there is a quarrel or dispute will try to stop it	0	0	0	0
31.	offers to help other children who have difficulty with a task	0	0	0	0
32.	comforts a child who is crying or upset	0	0	0	0
33.	spontaneously helps to pick up objects which another child has dropped (e.g., pencils, books)	0	0	0	0
34.	will invite bystanders to join in a game	0	0	0	0
35.	helps other children who are feeling sick	0	0	0	0
36.	is upset when left by parent/guardian	0	0	0	0
37.	gets into physical fights	0	0	0	0
38.	bullies or is mean to others	0	0	0	0
39.	kicks, bites, hits other children or adults	0	0	0	0
40.	takes things that do not belong to him/her	0	0	0	0
41.	laughs at other children's discomfort	0	0	0	0
42.	can't sit still, is restless	0	0	0	0
43.	is distractible, has trouble sticking to any activity	0	0	0	0
44.	fidgets	0	0	0	0
45.	is disobedient	0	0	0	0





Section C - Social and Emotional Development

Would you say that this child:	often or very true	sometimes or somewhat true	never or not true	don't know
46. has temper tantrums	Ô	ô	Ô	Ô
47. is impulsive, acts without thinking	0	0	0	0
48. has difficulty awaiting turn in games or groups	0	0	0	0
49. cannot settle to anything for more than a few moments	0	0	0	0
50. is inattentive	0	0	0	0
51. seems to be unhappy, sad, or depressed	0	0	0	0
52. appears fearful or anxious	0	0	0	0
53. appears worried	0	0	0	0
54. cries a lot	0	0	0	0
55. is nervous, high-strung, or tense	0	0	0	0
56. is incapable of making decisions	0	0	0	0
57. is shy	0	0	0	0
58. sucks a thumb/finger	0	0	0	0
Section D - Special Concerns				

1.	Does the student have	a problem that influ	ences his/her al	bility to do school v	vork in a regular	classroom?
	(based on parent infor	mation, medical dia	gnosis, and/or te	eacher observatior	1)	

yes ono odon't know (If answered no/don't know go to que	uestion 5
--	-----------

If YES above, please mark all that apply.

Please base your answers on teacher observation or medical diagnosis and/or parent/guardian information.

		YES Observed	YES Parent Info/Medic	al		YES Observed	YES Parent Info/Medical Diagnosis
		O D D D O T O U	Diagnosis	f.	emotional problem	0	0
2a.	physical disability	0		g.	behavioural problem	0	0
b.	visual impairment	0	0	h.	home environment/problems at ho	ome O	0
c.	hearing impairment	0	0	i.	chronic medical/health problems	0	0
d.	speech impairment	0	0	j.	unaddressed dental needs	0	0
_e.	learning disability	0	0	k.	other (if known, print below)	0	0

3.	If the child has received a diagnosis or identification by a	doctor or psychologica
	professional please indicate (see the Guide for codes)	





	Section D - Special Concerns con't						
		yes ^	no ^	don't know			
	Is the child receiving any school based support(s) (e.g. educational assistant, equipment)?	0	0	0			
5. _{a.}	. Is the child currently receiving further assessment?	0	0	0	_		
b.	. Is the child currently on a wait list to receive further asse	essment? O	0	0			
C.	Do you feel that this child needs further assessment?	0	0	0			
	Section E - Additional Questions			•			
o tł	ne best of your knowledge, please mark all that a	apply to this ch	ild:		yes ^	no ^	don'i knov
	attended an early intervention program Specify if known, please print:				- 0	0	0
	has been in non-parental care on a regular basis prior to	kindergarten entr	у	·	0	0	С
í	f yes, please specify type of care arrangement (please	e refer to Guide	for exa	mples):			
а. (Centre-based, licensed, non-profit	2e. Other home	-based,	unlicen	sed, rela	ative	0
). C	Centre-based, licensed, for profit	2f. Child's home	e, non-re	elative			0
. C	Other home-based, licensed	2g. Child's home	e, relati	ve			0
i. C	Other home-based, unlicensed, non-relative	2h. Other/don't	know				0
	o the best of your knowledge, prior to the child's entry to k his arrangement	indergarten, was		full-time	part-ti		don't know
	attended other language or religion classes				yes	no	don't know
	Specify if known, please print:				Ö	Ö	Ö
	attended an organized pre-school/nursery school (only if it was not the main child-care arrangement)	<i>part-time</i> , and			0	0	0
а	attended Junior Kindergarten				0	0	0
č					0	0	0

