



Christian Academy of Little Saints

1520 Witte Rd. Houston, TX 77080

Child Developmental Assessment

Please fill out the blanks with information as much as you know. (최대한 자세히 적어주십시오.)

Child's Name _____ Date of Birth _____ Gender : M / F

Child's Nickname or other Name used at home _____

Toilet Training (대소변 가리기 훈련)

Does your child need assistance with toileting? 화장실 사용시 도움이 필요한가요?	Yes	No
How can we best help and your ideas? 화장실 사용을 돕는 가장 효과적인 방법은?		

Behaviors (행동상 특이점)

Does your child have any special fears? 아이가 특별한 대상에 두려움을 느끼나요? (Yes / No) If he/she does, what is it? 두려워하는 것은 무엇인가요?
How does your child communicate his/her needs? 필요한 의사를 표현하는 방법은? Can he/she express it verbally? 아이가 언어로 의사를 표현할 수 있나요? (Yes/ No)
Is there any words your child use frequently? and meaning of it ? 아이가 잘 사용하는 말이 있나요? 어떤 뜻인가요?
How do you tell your child to stop a behavior that you don't approve of or that might be dangerous? 위험하거나 금지된 행동을 멈추게 하는 방법은?
Are there any particular routines that are particularly helpful at nap time? 낮잠시 특별한 습관?
What position is most comfortable for your child when he/she is napping? 낮잠시 편한 자세는?



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Eating Preferences (음식에 대한 선호)

What are your child's favorite foods/snacks? 가장 좋아하는 음식이나 스낵은 ?	
Does your child use utensils, eat with fingers, feed self? 식사시 포크나 스푼을 사용하나요? 혹은 손가락으로 먹는지?	
Does your child choke easily while eating? 식사시 자주 사래가 들리나요?	If any, what kinds? 어떤 종류의 음식을 먹을 때?

Activities (활동 상황)

What activities do you like to do with your child? 아이가 좋아하는 활동은?
What activities does your child like to do when playing with other children? 다른 친구와 놀 때 좋아하는 활동은?
What does your child like to do when he is playing alone? 혼자 놀 때 좋아하는 활동은?

Family History and Other Things to Be Aware (알아두어야 할 가족력 혹은 인지할 내용들)

Tell me about your family (i.e. child's parents, siblings, grandparents, and other extended family) 부모, 형제, 조부모 및 그외의 친척들에 관하여 알고 싶은 내용이나 간단한 소개
Other Important Facts or Comments 기타 아이에 대해 알고 있어야 할 중요한 내용

I verify that the above assessment was discussed with the parent(s) of _____ (Child's Name).

X _____
Signature of Parent

Date Signed