

## BRIGANCE® Screen Two-Year-Old Child Data Sheet

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A. Child's Name \_\_\_\_\_ Date of Screening \_\_\_\_\_ School/Program \_\_\_\_\_  
 Parent(s)/Guardian \_\_\_\_\_ Birth Date \_\_\_\_\_ Teacher \_\_\_\_\_  
 Address \_\_\_\_\_ Age \_\_\_\_\_ Examiner \_\_\_\_\_

B. Basic Assessments				C. Scoring			
Page	Assessment Number	Domain	Skill (Start with first item and proceed in order. Circle each correct response.)	Discontinue after (must be in a row)	Number Correct	Point Value for Each	Child's Score
45	1C	Language Development	<b>Identifies Body Parts:</b> Points to or touches: 1. feet    2. ears    3. tongue    4. head    5. legs    6. arms	3 incorrect	×	1	/6
46	2C	Physical Health & Development	<b>Gross-Motor Skills:</b> 1. Walks backward four steps 2. Jumps off floor with both feet 3. Stands on one foot momentarily	2 incorrect	×	4	/12
47	3C	Language Development	<b>Picture Vocabulary:</b> Names pictures of: 1. cat    2. dog    3. key    4. aeroplane    5. apple    6. car	3 incorrect	×	4	/24
48	4C	Language Development	<b>Identifies People in Picture by Naming:</b> Names: 1. man (father, dad, daddy, papa, gentleman) 2. girl (sister, daughter) 3. woman (mother, mum, mummy, mama, lady) 4. boy (brother, son)	3 incorrect	×	3	/12
49	5C	Language Development	<b>Knows Use of Objects:</b> Knows use of: 1. car    2. bed    3. chair	2 incorrect	×	4	/12
51	6C	Physical Health & Development	<b>Visual Motor Skills:</b> Strokes or scribbles with crayon are: 1. not purposeful or well controlled so frequently lose contact with the paper. (3 points) 2. purposeful or well controlled so rarely lose contact with the paper. (6 points)	—	×	3	/6
52	7C	Language Development	<b>Verbal Fluency:</b> 1. Uses two words that relate in combination 2. At least 50% of speech is intelligible 3. Uses three words that relate in combination	—	×	6	/18
54	8C	Physical Health & Development	<b>Builds Tower with Blocks:</b> Builds a tower with: 1. 2 blocks    2. 3 blocks    3. 4 blocks    4. 5 blocks    5. 6 blocks	2 attempts without success	×	2	/10
<b>D. Observations</b>				<b>E. Summary</b> Compared to other children included in this screening: Total Score = _____ /100			
1. Handedness: Right _____ Left _____ Uncertain _____ 2. Grasps pencil with: Fist _____ Fingers _____ 3. Hearing appears normal: Yes _____ No _____ Uncertain _____ 4. Vision appears normal: Yes _____ No _____ Uncertain _____ 5. Record other observations below or on another sheet.  _____ _____ _____				1. this child scored Lower _____ Average _____ Higher _____ 2. this child's age is Younger _____ Average _____ Older _____ 3. the teacher rates this child Lower _____ Average _____ Higher _____ 4. the examiner rates this child Lower _____ Average _____ Higher _____			
				<b>F. Recommendations</b> _____ _____ _____			

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