

Customized MacArthur Vocabulary Checklist: Level II (Toddler Form A)*

Copyright 1993 All Rights Reserved **Child is age 19-24 months**

Child's Name:	Child's Birthdate:
---------------	--------------------

VOCABULARY CHECKLIST

Children understand many more words than they use. We are particularly interested in the words your child SAYS or SIGNS. Please mark the words you have heard your child use. If your child uses a different pronunciation of a word, mark it anyway.

	says	Signs/ cues		says	Signs/ cues		says	Signs/cues		says	Signs/ cues
baa baa	<input type="checkbox"/>	<input type="checkbox"/>	hat	<input type="checkbox"/>	<input type="checkbox"/>	sky	<input type="checkbox"/>	<input type="checkbox"/>	all gone	<input type="checkbox"/>	<input type="checkbox"/>
meow	<input type="checkbox"/>	<input type="checkbox"/>	necklace	<input type="checkbox"/>	<input type="checkbox"/>	party	<input type="checkbox"/>	<input type="checkbox"/>	cold	<input type="checkbox"/>	<input type="checkbox"/>
ouch	<input type="checkbox"/>	<input type="checkbox"/>	shoe	<input type="checkbox"/>	<input type="checkbox"/>	friend	<input type="checkbox"/>	<input type="checkbox"/>	fast	<input type="checkbox"/>	<input type="checkbox"/>
uh oh	<input type="checkbox"/>	<input type="checkbox"/>	sock	<input type="checkbox"/>	<input type="checkbox"/>	mommy	<input type="checkbox"/>	<input type="checkbox"/>	happy	<input type="checkbox"/>	<input type="checkbox"/>
woof woof	<input type="checkbox"/>	<input type="checkbox"/>	chin	<input type="checkbox"/>	<input type="checkbox"/>	person	<input type="checkbox"/>	<input type="checkbox"/>	hot	<input type="checkbox"/>	<input type="checkbox"/>
bear	<input type="checkbox"/>	<input type="checkbox"/>	ear	<input type="checkbox"/>	<input type="checkbox"/>	bye	<input type="checkbox"/>	<input type="checkbox"/>	last	<input type="checkbox"/>	<input type="checkbox"/>
bird	<input type="checkbox"/>	<input type="checkbox"/>	hand	<input type="checkbox"/>	<input type="checkbox"/>	hi	<input type="checkbox"/>	<input type="checkbox"/>	tiny	<input type="checkbox"/>	<input type="checkbox"/>
cat	<input type="checkbox"/>	<input type="checkbox"/>	leg	<input type="checkbox"/>	<input type="checkbox"/>	no	<input type="checkbox"/>	<input type="checkbox"/>	wet	<input type="checkbox"/>	<input type="checkbox"/>
dog	<input type="checkbox"/>	<input type="checkbox"/>	broom	<input type="checkbox"/>	<input type="checkbox"/>	shopping	<input type="checkbox"/>	<input type="checkbox"/>	after	<input type="checkbox"/>	<input type="checkbox"/>
duck	<input type="checkbox"/>	<input type="checkbox"/>	comb	<input type="checkbox"/>	<input type="checkbox"/>	thank you	<input type="checkbox"/>	<input type="checkbox"/>	day	<input type="checkbox"/>	<input type="checkbox"/>
horse	<input type="checkbox"/>	<input type="checkbox"/>	mop	<input type="checkbox"/>	<input type="checkbox"/>	carry	<input type="checkbox"/>	<input type="checkbox"/>	tonight	<input type="checkbox"/>	<input type="checkbox"/>
airplane	<input type="checkbox"/>	<input type="checkbox"/>	plate	<input type="checkbox"/>	<input type="checkbox"/>	chase	<input type="checkbox"/>	<input type="checkbox"/>	our	<input type="checkbox"/>	<input type="checkbox"/>
boat	<input type="checkbox"/>	<input type="checkbox"/>	trash	<input type="checkbox"/>	<input type="checkbox"/>	dump	<input type="checkbox"/>	<input type="checkbox"/>	them	<input type="checkbox"/>	<input type="checkbox"/>
car	<input type="checkbox"/>	<input type="checkbox"/>	tray	<input type="checkbox"/>	<input type="checkbox"/>	finish	<input type="checkbox"/>	<input type="checkbox"/>	this	<input type="checkbox"/>	<input type="checkbox"/>
ball	<input type="checkbox"/>	<input type="checkbox"/>	towel	<input type="checkbox"/>	<input type="checkbox"/>	fit	<input type="checkbox"/>	<input type="checkbox"/>	us	<input type="checkbox"/>	<input type="checkbox"/>
book	<input type="checkbox"/>	<input type="checkbox"/>	bed	<input type="checkbox"/>	<input type="checkbox"/>	hug	<input type="checkbox"/>	<input type="checkbox"/>	where	<input type="checkbox"/>	<input type="checkbox"/>
game	<input type="checkbox"/>	<input type="checkbox"/>	bedroom	<input type="checkbox"/>	<input type="checkbox"/>	listen	<input type="checkbox"/>	<input type="checkbox"/>	beside	<input type="checkbox"/>	<input type="checkbox"/>
applesauce	<input type="checkbox"/>	<input type="checkbox"/>	bench	<input type="checkbox"/>	<input type="checkbox"/>	like	<input type="checkbox"/>	<input type="checkbox"/>	down	<input type="checkbox"/>	<input type="checkbox"/>
candy	<input type="checkbox"/>	<input type="checkbox"/>	oven	<input type="checkbox"/>	<input type="checkbox"/>	pretend	<input type="checkbox"/>	<input type="checkbox"/>	under	<input type="checkbox"/>	<input type="checkbox"/>
coke	<input type="checkbox"/>	<input type="checkbox"/>	stairs	<input type="checkbox"/>	<input type="checkbox"/>	rip	<input type="checkbox"/>	<input type="checkbox"/>	all	<input type="checkbox"/>	<input type="checkbox"/>
cracker	<input type="checkbox"/>	<input type="checkbox"/>	flag	<input type="checkbox"/>	<input type="checkbox"/>	shake	<input type="checkbox"/>	<input type="checkbox"/>	much	<input type="checkbox"/>	<input type="checkbox"/>
juice	<input type="checkbox"/>	<input type="checkbox"/>	rain	<input type="checkbox"/>	<input type="checkbox"/>	taste	<input type="checkbox"/>	<input type="checkbox"/>	could	<input type="checkbox"/>	<input type="checkbox"/>
meat	<input type="checkbox"/>	<input type="checkbox"/>	star	<input type="checkbox"/>	<input type="checkbox"/>	gentle	<input type="checkbox"/>	<input type="checkbox"/>	need	<input type="checkbox"/>	<input type="checkbox"/>
milk	<input type="checkbox"/>	<input type="checkbox"/>	swing	<input type="checkbox"/>	<input type="checkbox"/>	think	<input type="checkbox"/>	<input type="checkbox"/>	would	<input type="checkbox"/>	<input type="checkbox"/>
peas	<input type="checkbox"/>	<input type="checkbox"/>	school	<input type="checkbox"/>	<input type="checkbox"/>	wish	<input type="checkbox"/>	<input type="checkbox"/>	if	<input type="checkbox"/>	<input type="checkbox"/>

Total Words Said

Total Words Signed or Cued

Total Words both Said and Signed/Cued

Has your child begun to combine words yet, such as "nother cookie" or "doggie bite?"

Not Yet

Sometimes

Often

Customized MacArthur Vocabulary Checklist: Level II (Toddler Form A)*

Copyright 1993 All Rights Reserved **Child is age 19-24 months**

Child's Name:	Child's Birthdate:
---------------	--------------------

(to be completed by child's service coordinator or teacher of deaf/hard of hearing)	
PERCENTILE compared to normal hearing age peers (corrected age if premature):	Estimated growth in vocabulary production since last communication monitoring period
Vocabulary Production _____ %	<p>Do only for vocabulary production</p> <p>Step 1. Look at the appropriate norms table and find the 50th percentile line.</p> <p>Step 2. Identify the column of words with the number closest to the total achieved by the child during the last communication monitoring session</p> <p>Step 3. Look at the age at the top of the column : ____ months</p> <p>Step 4. Using the norms tables, find the 50th percentile score closest to the child's current score; note the age: ____ months</p> <p>Step 5. Subtract the two age in months numbers for the child's estimated growth during the test interval: ____months</p>

PERFORMANCE ON SKI*HI LANGUAGE DEVELOPMENT SCALE (LDS)	
ESTIMATED LEVEL OF RECEPTIVE LANGUAGE	ESTIMATED LEVEL OF ECPRESSIVE LANGUAGE
_____Unit/Level Approximate months of progress since last monitoring _____ (assumes approximately 2 months progress for every unit level)	_____Unit/Level Approximate months of progress since last monitoring _____ (assumes approximately 2 months progress for every unit level)

*Created by MacArthur CDI authors and licensed to the State of Florida. For information about CDI forms, see www.sciences.sdsu.edu/cdi.