

Parent Fluency Questionnaire

Student: _____ **DOB:** _____ **Age:** _____ **Date:** _____

Name of adult completing this questionnaire: _____

Relationship to student: _____

At what age did you first notice your child's stuttering?

How many years or months has your child been stuttering?

This problem has become-- Worse? ____ Better? ____ Remained the same? ____

Are there people in your family who stutter or have a history of stuttering? ____ If so, who are they? (Father, aunt, mother's father/paternal grandfather, etc.)

Has anything changed during the last six months or have there been any significant life events (death, divorce, new baby, move etc)?

Does your child have difficulty with certain sound or words? If so, which ones?

Please describe the times when your child's speech is...

Much better

Much worse

What have you tried to help your child? Does this help?

Do you consider your child to be more sensitive than most children? ____ Yes ____ No

Is your child likely to be upset if he or she can't do something well? ____ Yes ____ No

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Types of disfluencies (Please check)				
	Seldom	Sometimes	Often	Not Observed
Hesitations — Pauses as if thinking about what to say before or during speaking.				
Interjections — Adds sounds, syllables or words when speaking. ("Well, I want to, well, go home." "Do you, do you, want some?")				
Revisions of phrases or sentences Changes what is said. ("I want to, I'd like to go somewhere, can I go with you?")				
Phrase repetitions ("Mom can I, can I, get some candy?")				
One-syllable word repetitions --Two or less with no tension. (Can I get, get, get some candy?)				
Part-word syllable repetitions -- Two or less, no tension.				
One syllable word repetitions — Three or more or uneven stress. ("Mom can, can, can, I get some candy?" or "Mom CAN CAN some candy")				
Part-word syllable repetitions — Three or more or uneven stress. ("I want a pu, pu, puppy." Or, "I want a pu, PUppY.")				
Sound repetitions, especially "uh". (M, m, m, mom, can I go?" or Uh, uh, can I, uh, go, uh, uh, home?)				

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	Seldom	Sometimes	Often	Not Observed
Prolongations – Stretching or holding onto a sound. (“MMMMMMMMom, I want that.”)				
Increased muscle tension noted in the mouth, throat or lips. (Child seems to press lips together tightly or force words out.)				
Non-speech behaviors. (Blinks eyes, slaps body, bends or moves body in some way to get speech started.)				

Awareness (Please check)					
	My child shows little or no awareness of his/her speech difficulties	My child shows some awareness of his/her speech difficulties (surprised, embarrassed, or frustrated.)	My child is aware of his/her speech difficulties	My child shows fear of speaking and embarrassment after stuttering	My child shows very strong negative feelings about his/her speech (My child is avoiding some people or situations to keep from stuttering.)
How aware is your child of his/her speech difficulty?					

Do you have other comments or concerns about your child?

Parent Fluency Questionnaire

Parent Signature

Parent Contact Information

Parent Name: _____

Parent Phone Number: _____

Email Address: _____

Preview

FLUENCY Teacher Input

Speech-Language Evaluation Teacher Questionnaire

Name: _____ Date: _____

The child above has been referred for or is receiving services regarding fluency skills.
Please fill out the questionnaire below regarding what you observe in class.

1. This student:

_____ seldom volunteers to participate in class.

_____ seems to avoid speaking in class.

_____ is difficult to understand in class.

_____ demonstrates frustration when speaking

If so, how?

2. This student stutters when he or she:

	Yes	No	Sometimes
Speaks to the class			
Talks with friends			
Gets upset			
Carries on a conversation			
Shares ideas			
Reads aloud			
Answers questions			
Talks to adults			

FLUENCY Teacher Input

3. Check any of the following behaviors you have noticed in this child's speech:			
	Yes	No	Sometimes
Revisions (starting and stopping and starting over again).			
Frequent interjections (um, like, you know).			
word repetitions (we-we-we-).			
Phrase repetitions (I want, I want, I want)			
part-word repetitions (wa-wa-wa-want)			
sound repetitions (w-w-w-want,			
prolongations (waaaaa...)			
blocks (noticed tension/no speech comes out)			

FLUENCY Teacher Input

4. Describe the student's overall speech and language functioning:

5. How does the child react when they are having difficulty with their speech:

6. How do you respond when the child has difficulty speaking?

7. How does the student's stuttering affect classroom participation, peer relations, or educational performance?

8. Are there questions you would like answered about stuttering or helping this child to be successful in the classroom:

Teacher Signature

Date