STUTTERING / FLUENCY CHECKLIST

Name Grade Teach	er Date
School:	
Please complete this checklist based upon observation of your student's	
stuttering behaviors over the past month.	
How frequently does the student stutter?	
occassionallyoften consistently (r	nost instances when student talks)
1. Compared to his/her peers, this student: (c	heck all that apply)
avoids speaking in class (does not volunteer, appears to not want to reply)	
appears to be unaware that he/she has a stuttering problem	
speaks with little or no outward signs of frustration	
is difficult to undersatnd in class because	
replaces words (says a different word than the intended word)	
Rate of speech: average fast very fast	
Organizational skills: average some problems poor	
2. This student stutters when: (check all that apply)	Environments where it occurs:
talking with peers	lunchroom
talking with adults	playground/recess
speaking to the class	hallway
when upset	specials (PE, music, art, etc.)
sharing ideas or telling a story	after school activities
answering questions	classroom
carrying on a conversation	
reading aloud	
other:	
Check any of the following behaviors you have noticed in theis student's speech:	
revisions (stops and starts over again)	
repeats words or phrases	
other:	
Unusual face or body movements:	
eye blinks / eye movements	avoids eye contact
facial grimaces	head nods
other:	
4. How does the student's stuttering interfere with his/her academic/social functioning?	
When having difficulty speaking, he/she reacts by	
and shows frustration by	
Additional Comments:	