

Cooper Screening of Information Processing

(C-SIP)

Administrator's Manual

By

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Introduction

The Cooper Screening of Information Processing was developed by Dr. Richard Cooper to provide teachers and other professionals with a way to determine if a person manifests any common characteristics of learning problems. The screening can be thought of as a diagnostic teaching tool. A teacher over time would obtain much of the same information as he or she got to know the student and observed the way the student learned and the errors which the student commonly made.

The screening is designed so that it can be used without extensive training. Some information about the student will be obtained by a person administering the screening for the first time, but much more information will be obtained after the person has administered the screening to many different students. Each time the person administers the screening the similarities and differences among students will become clearer.

This manual is divided into two parts 1) the quick start and 2) the in-depth explanation. The Quick Start section is for those who, like myself, prefer to try something and read about it later. The in-depth explanation is for those who like to read about something before trying it.

Ideally the Screening is administered individually, but parts of it can be administered to a group. However, the amount of information gained from a group administration will be less than when completed individually.

Individuals who have observed the administration of the Screening report that it flows more like a conversation than an assessment. This is because the administrator can add more questions to obtain clarification or more information about the topic being asked. Many times individuals being screened report that it did not feel like they were being tested.

The Screening usually takes about 45 to 50 minutes to administer, but, for individuals with very low self-awareness or very low basic skills, the screening may only take 15 or 20 minutes. However, the screening can take longer than an hour with individuals who need to explain everything.

QUICK START

1) Read through the screening and answer the questions for yourself. Record the total yes responses on the Screening Summary and note whether any of the sections correspond to your own weaknesses.

2) Administer the screening to a family member, friend or colleague to get a feeling for how it flows. It should be administered like a conversation. Some questions do not have a yes or no answer *Are you organized or disorganized?* Mark yes if the person is disorganized. Score the summary sheet, and think about how the results compare to what you know about the person.

3) Administer the screening to another person who you would not suspect of having any learning problems and compare the results to the results of the other person you screened.

4) Administer the screening to a student who you suspect has weak academic skills and compare the results to the other two that you administered.

5) Read this manual for a better understanding of each section of the screening.

Personal Information

Page 1, Part 1

What is the purpose of this section?

The first page is designed for the collection of personal and background information.

What to look for?

Watch for the reason the person has come for the assessment. This will set the tone and sequence of the screening. Individuals who have chosen to take the screening tend to be more open and the screening can be administered in the order it is laid out. The sequence may be different for individuals who are required to take the screening. These persons may try to answer the questions the way they think the person requiring the screening would like them to be answered. For example, a person who is referred by an employer may try to minimize any learning difficulties. I usually then administer the skills part of the screening first, beginning with handwriting. After we have completed the handwriting, math, reading and vocabulary sections, I go back and ask the questions in the other sections.

Special considerations:

For most people being screened the personal information provides only the factual information, however, occasionally individuals will manifest problems such as remembering their age, birth date, address, or phone number. Make notes about such problems.

The reason for the screening and who referred the person can provide valuable information about how to administer the screening. For example, an adult referred for a reading problem will have a different emphasis than the person who is referred by an employer who is concerned about low productivity. The administration of the screening for a child who is doing poorly in elementary school will differ from a college student who is struggling with a math course.

Cooper Screening For Information Processing

Evaluation Date ___/___/___ Client's Date of Birth ___/___/___ Age _____

Client's Name _____ Interviewer _____

Address _____ Agency _____

_____ Marital Status S ___ M ___ D ___ W ___

City _____ State _____ Zip _____

Phone _____

Reason for the Screening _____

Referred by _____ at _____

Educational History

Page 1, Part 2

What is the purpose of this section?

The Educational History Section is designed to provide an understanding of how much and what type of educational experiences the person has had. The amount of education the person has had will set the tone for the rest of the screening. For example if the person being screened was referred by a literacy council to determine how to best teach the person to read and the person dropped out of school during the 9th grade from special education classes, the questions may need to be re-worded to simpler language. The reading section would begin with line one, and the Level II vocabulary would be used and if the person has little trouble with that level, then Level III would also be used. In contrast, if the person is a college graduate, self-referred to determine why he or she is having difficulty on the job, the questions can be asked as written, the reading section may be spot checked, Level III vocabulary would be administered and much attention would be paid to work history, social skills and any thought process which was significant.

What to look for?

Through this section the administrator of the screening can get a sense for the person's attitude about school. Was it a good experience? Was it a frustrating experience?

Special considerations:

If the person attended many schools, it is not necessary to list them all. What is important is the type of schools the person attended, e.g. public or private, regular classes or special education. If the person dropped out of school, ask why and note the reason if the person provides it. Ask if the person remembers any labels, even informal ones, that were used to describe the person's school performance such as: dyslexic, learning disabled, slow learner, not living up to potential, good with their hands etc. Any other information about the person's educational history can be noted on page 12 (*Observations, Notes*) There are two questions about a person's vision and hearing. These questions are not scored but are important to consider for the person's overall profile.

Educational History

Current grade, last grade completed, or the number of years the person attended school. _____

Schools _____

Best Subject _____

Worst Subject _____

Did you drop out of high school before graduation? Yes ____

Did you like school? (Mark yes if the person disliked school.) Yes ____

Did you ever fail a subject or repeat a grade? Yes ____

Did you ever have to attend summer school to make up work? Yes ____

Did you have difficulty with English or Language Arts classes? Yes ____

Did you have difficulty with math classes? Yes ____

Were you ever in special education classes? Yes ____

Were you ever tested for a learning disability, ADD or other problems? Yes ____

If yes, at what age? _____

Were you ever labeled? (e.g. LD, ADD, dyslexic, brain damaged
emotionally disturbed, retarded, a behavioral problem, slow learner, etc.) Yes ____

What Label (s) _____

Reported Problems _____

Summary of Educational History: Number yes **Short Total** _____ Total red and black _____

Do you have any vision problems or wear glasses? _____

Do you have any hearing problems or use a hearing aid? _____

What is the purpose of this section?

The purpose of the Attention Section is not to diagnose ADD but rather to determine if the person's mind is racing.

What to look for?

Watch for quick speech, restlessness and distractibility.

Special considerations:

The first four questions provide a sense to what degree attention can be a problem. A person answers yes to the first question and no to the other three obviously has less of an attention problem than the person who answers yes to the first four questions.

Attention

Were you an active child?	Yes ____
Were you ever called hyper or hyperactive, even informally?	Yes ____
Are you an active person now?	Yes ____
Do you have a high energy level compared to your peers?	Yes ____
Do you find your mind racing so you get too many ideas or thoughts at once?	Yes ____
Do you have many tasks, projects, going on at once?	Yes ____
Do you have a short attention span?	Yes ____
Do you have a tendency to daydream?	Yes ____
Do you leave doors and drawers open?	Yes ____
Are you easily distracted?	Yes ____
Summary of Attention Problems	Number Yes Total ____

Motor Skills

Page 2, Part 2

What is the purpose of this section?

The purpose of the Motor Skills Section is to determine if weak motor skills are a problem.

What to look for?

Watch for the persons movements and handwriting. Are they awkward or clumsy?

Special considerations:

If the person is not old enough to drive, ask about riding a bicycle. If the person is old enough but does not drive, ask why and make a note of the reason. Many adults with reading problems have never obtained a drivers license while others are afraid to drive because of poor motor skills. Only about 10% of the individuals I have screened have motor skill problems, but for them such difficulties can have a significant impact on their education and life.

Motor Skills

Do you have poor handwriting?	Yes ____
Did you avoid playing sports as a child?	Yes ____
Do you avoid playing sports now?	Yes ____
Do you find driving difficult?	Yes ____
Are you a poor driver?	Yes ____
Do you frequently drop or spill things?	Yes ____
Do you consider yourself clumsy?	Yes ____
Do you have problems with hand/eye coordination?	Yes ____
Summary of motor problems	Number Yes Total ____

What is the purpose of this section?

The purpose of the Auditory Section is to determine if the person has difficulty with auditory perception and racing thoughts which limit auditory perception.

What to look for?

First pay attention to any words that the person might miss or misinterpret. Individuals with a racing mind will often exhibit triggering when rhyming e.g. *slow -- fast, quick -- fix*. Triggering is the term to describe the phenomenon of a person's thoughts jumping past the correct response to the next logical response or to the opposite response.

Special considerations:

The first question is usually answered with a definite yes or a questioning look. Those individuals who have this problem know it because it usually has caused the person difficulty in social situations. The person who does not have this problem wonders why you would ask such a question.

Auditory

Do you find yourself listening to more than one conversation at a time? Yes ____

Rhyme the word:

CAT _____

SLOW _____

QUICK _____

Person has difficulty rhyming? Yes ____

Do you often mishear words that are said to you? Yes ____

Do you misinterpret what is said to you? Yes ____

Do you take things that are said too literally or miss double meaning or jokes? Yes ____

Do you have difficulty paying attention to long conversations or lectures? Yes ____

Do you have difficulty hearing what one person is saying when there are a lot of people talking? Yes ____

Does your mind race ahead thinking about the first things that was said to you so you do not hear or pay attention to the rest of what was said? Yes ____

Do you have difficulty with spelling? Yes ____

Do you have difficulty reading (decoding or sounding out) unfamiliar words? Yes ____

Summary of Auditory Problems Number yes **Short Total** ____ Total red and black ____

Right/Left Discrimination

Page 3, Part 1

What is the purpose of this section?

The purpose of the Right/Left Discrimination Section is to determine if the person makes reversals, confusibles or has difficulties with directions or “either/or” relationships.

What to look for?

Some people have a clue to remember right or left, like a ring, a watch or the feeling of the hand the person writes with. If they need a clue, then mark yes to the first question.

Special considerations:

1) If a person responds that he/she does not know if reversals were a problem as a child, but has or evidences this problem (handwriting sample), then you can check “yes” for the problem as a child. 2) If a person does not use a screwdriver, you can ask if he/she needs to stop and think which way turn the handles to adjust the temperature in a shower. 3) You do not have to ask if the person stops at green lights if the person does not drive or has answered no to most of the questions.

Right/Left Discrimination

Do you confuse you right and left?	Yes ____
Check: How do you know your right and left? _____	
Did you reverse letters or numbers as a child?	Yes ____
Do you reverse letters or numbers now, or get phone numbers wrong?	Yes ____
Do you have to stop and think when someone tells you to turn right or left?	Yes ____
Do you have difficulty making choices (what to eat, where to go, what to do)?	Yes ____
Do you have to stop and think which way to loosen a screw that is tight?	Yes ____
Do you point one way when you mean the other or say the opposite as you point?	Yes ____
Do you have difficulty with North, South, East and West?	Yes ____
Do you find <i>True and False</i> questions difficult or do you read too much into questions?	Yes ____
Do you find the same is true for some multiple choice questions, or have difficulty deciding between two answers which are similar?	Yes ____
Do you find yourself stopping for green lights?	Yes ____
Do you get lost in large buildings, malls or parking lots?	Yes ____
Do you have difficulty reading maps or have to turn them to match the direction you are traveling?	Yes ____
Summary of Right/Left Discrimination: Number yes Short total ____ Total red and black ____	

What is the purpose of this section?

The purpose of this section is to determine if the person has difficulty with organization.

What to look for?

Watch for evidence of disorganization such as disorganized personal effects or papers, coming late or other things which indicate that the person may be disorganized.

Special considerations:

If the person does not write much, you should skip the question of writing. If the person’s communication is disorganized, then, even if the person states that oral communication is organized, mark it as a “yes” answer.

Organizational Skills			
Are you organized or disorganized?	disorganized		Yes ____
	Do you tend to collect too many things?		Yes ____
Is your living or work space messy or disorganized?			Yes ____
	Do you misplace or lose things, especially little things such as keys, combs glasses, pens, pencils, homework, tools, utensils, etc.?		Yes ____
Are you often late?			Yes ____
	Do you have difficulty planning or using free or unstructured time?		Yes ____
Do you have difficulty organizing your ideas when you write?			Yes ____
	Do you have difficulty organizing your ideas when you speak?		Yes ____
Summary of Organizational Skills: Number yes		Short total ____	Total red and black ____

Employment

Page 3, Part 3

What is the purpose of this section?

This section is designed to collect information about a person's work history and any problems which may be related.

What to look for?

Make note of the jobs the person has had, not necessarily a detailed work history, but rather the types of jobs. Ask about and note any patterns of problems obtaining or maintaining employment.

Special considerations:

Some individuals may not be forthcoming about employment problems. Obtain any information you can but stop if you note the person becoming uncomfortable or unwilling to provide details about problems in the workplace.

Employment

Are you employed or unemployed?	unemployed	Yes _____
Do you have difficulty learning new jobs?		Yes _____
Do you have difficulty completing tasks on the job?		Yes _____
Have you ever been fired because of such problems?		Yes _____
Are you or have you been a client of Vocational Rehabilitation?		Yes _____
What types of jobs have you had?		

Summary of Employment

Number Yes Total _____

Emotional

Page 4, Part 1

What is the purpose of this section?

This section is not meant to be an in depth analysis of a person's emotional state but rather to alert the administrator of any emotional issues which may affect learning.

What to look for?

Watch for test or performance anxiety, nervousness, crying, hostility or anger. Make note of any such behaviors.

Special considerations:

When asked about medications, some individuals will provide a detailed list of prescription drugs. A listing of these is not necessary. Many individuals who have problems with drugs and alcohol will not be honest about their usage. Others will indicate that they have had difficulties in the past. If you know the person well and know that the person has difficulties with drugs and alcohol, don't challenge him/her but make a note about the unwillingness to answer. These questions are to understand if substance abuse has contributed to the person's difficulty with school but the information is not that significant and pursuing it may result in the person not being forthcoming with other information.

Emotional

Are you a moody person?	Yes ____
Are you a nervous person? (more than most)	Yes ____
Are you a worrier?	Yes ____
Any problems with alcohol?	Yes ____
Any problems with drugs?	Yes ____
Do you, or have you suffered from test anxiety?	Yes ____
Have you ever gone blank, or froze, on a test?	Yes ____
Have you ever been on medication for psychological reasons? (e.g. depression, anxiety, etc.)	Yes ____
Have you ever been hospitalized for psychological reasons?	Yes ____
Did you ever have a severe head injury? If yes, at what age? _____	
Did you have problems in school before the injury? _____	Yes ____

Summary of Emotional

Number Yes Total ____

Social and Family

Page 4, Part 2

What is the purpose of this section?

The Social and Family Section is designed to identify any interpersonal difficulties which interfere with the person's functioning and whether other family members have now or had in the past any difficulties learning.

What to look for?

Some individuals with learning differences have difficulty with social skills, while others have excellent social skills which enable them to either appropriately seek assistance or to inappropriately con people. This screening will not provide you with information about the latter but it can give some indication that the former is a possibility.

Special considerations:

Many individuals do not know if their parents had any difficulties in school, so do not expect a detailed answer. If the person hesitates, assure him/her that it is not unusual for parents to not discuss such things with their children and move on.

Social and Family

Are you shy or outgoing? shy	Yes ____
Do you have difficulty making friends?	Yes ____
Would you say you have only a few friends?	Yes ____
Do you have difficulty getting along with members of the opposite sex?	Yes ____
Would you consider yourself a social person or a loner? loner	Yes ____
Do you have any children?	
If yes, how many? _____ ages? _____	
Do they or did they have any learning problems or difficulties in school?	Yes ____
Do you have any siblings?	
If yes, how many? Brothers _____ Sisters _____	
Do they or did they have any learning problems or difficulties in school?	Yes ____
Your father's occupation? _____	
Did he have any learning problems or difficulties in school?	Yes ____
Your mother's occupation? _____	
Did she have any learning problems or difficulties in school?	Yes ____
Summary of Social and Family	Number Yes Total ____

Oral Communication

Page 4, Part 3

What is the purpose of this section?

The Oral Communication Section is designed to identify any significant problems with speaking.

What to look for?

In addition to the person's own understanding of his/her oral communication skills, the administrator should watch for the use of simple words and sentences, incorrect grammar, awkward sentence structure, a tendency to change subject or go off on tangents. Note any mispronunciations.

Special considerations:

If the person reports that he/she does not talk too much but goes on and on answering the questions in this screening, you would mark a yes for that question.

Oral Communication

Do you believe that your speaking vocabulary is smaller than others?	Yes ____
When you speak, do people have difficulty understanding what you are trying to communicate to them?	Yes ____
Are there any words which you have difficulty pronouncing or get you tongue-tied?	Yes ____
Do you have a tendency to ramble, changing the topic often?	Yes ____
Do you talk too much? (Check: Does the person talk too much or take too long to answers these questions?)	Yes ____
Do you interrupt others?	Yes ____
Summary of Oral Communication: Number yes Short total ____ Total red and black ____	

What is the purpose of this section?

The section is designed to understand the person's ability to express thoughts in writing.

What to look for?

Make note of the type of writing the person normally does. Ask what the person may have written today, yesterday or this week. Individuals with limited spelling and writing skills do not write much. Such a person may have only written his or her name in the last week.

Special considerations:

If the person does not write much or uses only simple sentences or less, mark all the questions as "yes" and go to the next section. In this way writing will show up as a problem on the screening summary rather than being missed. If you are unsure of the person's writing ability, you can change the order of the screening and have the person provide the handwriting sample. Examine the writing sample and determine whether to ask the questions in the Writing section. If the person is unable to write the letters of the alphabet or complete a sentence, you can skip Writing Section. Remember to mark all the questions with "yes".

Writing

Do you have difficulty with spelling? Yes ____

Do you write a lot or only what you have to? Only what one must Yes ____

Is expressing your thoughts and ideas in writing difficult for you? Yes ____

Do you have difficulty deciding what to write about? Yes ____

Do you have difficulty taking notes? Yes ____

Spelling ____ Handwriting ____ Main Idea ____ Can't write and listen ____

Do you speak better than you write? Yes ____

Do you find that when you write some of your sentences are incomplete? Yes ____

Do you often write run-on sentences? Yes ____

Do you have difficulty with grammar or with the less-used grammar rules? Yes ____

Do you have difficulty with punctuation (e.g. commas, semicolons, etc)? Yes ____

Do you skip words when you write? Yes ____

Do you procrastinate on writing assignments? Yes ____

Summary of Writing:

Number yes

Short total ____

Total red and black ____

Handwriting

Page 5, Part 2

What is the purpose of this section?

The purpose of the handwriting sample is to check a number of things; legibility, size of letters, spacing, spelling, sentence structure and drawing. Paper without lines is used purposefully to note spacing and slanting.

What to look for?

Watch for triggers, thinking a letter or number and writing another one. Also watch how quickly the person writes and note very slow or very fast handwriting.

Special considerations: If the person cannot write a sentence, skip it. If the person becomes too frustrated with the alphabet, move on. If the person's sentence or drawing are difficult to read or understand, ask what the person was trying to write or draw and write that on *Notable Observations*.

Handwriting

Turn to the handwriting sample page and have the person do the following:

Print your full name.

Write your full name in cursive, script, sign your name.

Write a sentence about why you are here.

If not able to write that, can you write a sentence about anything.

(If the person is not able to write anything, move to the next item.)

Write or print the alphabet.

Write the numbers 1 to 20.

Draw a picture.

- Is the person's handwriting slanted up or down the page? Yes ____
- Is the person's handwriting difficult to read? Yes ____
- Are the letters oversized for his/her age? Yes ____
- Is the alphabet incomplete? Yes ____
- Does the person mix capital and small letters? Yes ____
- Are there any reversals? Yes ____
- Does the sentence have any errors? Spelling ____ Missing words ____ Incomplete ____ Yes ____
- Does the person write the second digit before the 1 when writing the teen numbers? Yes ____
- Does the person hold the pen or pencil in an unusual way? Yes ____
- Is the person's drawing disproportionate, too simple, very unusual? Yes ____

Notable observations _____

Summary of Handwriting: Number yes Short total ____ Total red and black ____

What is the purpose of this section?

The Basic Math Skills Section is designed to determine how a person processes math facts and sample the skill level. Rather than a paper and pencil test, this assessment of basic math skills is oral so that the administrator can observe and question the person about how he or she arrives at the answers.

What to look for?

Watch for counting and guessing. Any hesitation indicates that the person does not know the number facts by automatic recall.

Special considerations:

If the person responds without hesitation, mark the A ___ for Automatic Recall. Otherwise ask the person how he or she arrived at the answer and mark the appropriate category: D___ Delay in Automatic Recall, LD___ Long Delay, NR___ Number Relationship, G___ Guessing, CF___ Counting on Fingers, CH___ Counting in Head.

For those individuals who are suspected of not knowing the number facts listed in this section, young children or individuals with significant disabilities, ask a different set of number facts. For example, instead of $9 + 7$ ask $5 + 5$ and instead of 8×7 ask 2×8 . If the person knows these number facts ask others which are more difficult.

Basic Math Skills

Do you often count on your fingers or in your head? Yes _____

Does the person have difficulty with the addition facts? Yes _____

Check: $9 + 7$ _____ *A___ D___ LD___ NR___ G___ CF___ CH___
 $8 + 6$ _____ *A___ D___ LD___ NR___ G___ CF___ CH___

Does the person have difficulty with subtraction facts? Yes _____

Check: $17 - 9$ _____ *A___ D___ LD___ NR___ G___ CF___ CH___
 $12 - 5$ _____ *A___ D___ LD___ NR___ G___ CF___ CH___

Did you have difficulty learning the multiplication tables? Yes _____

Does the person have difficulty with multiplication facts? Yes _____

Check: 8×7 _____ *A___ D___ LD___ NR___ G___ CF___ CH___
 7×6 _____ *A___ D___ LD___ NR___ G___ CF___ CH___
 9×6 _____ *A___ D___ LD___ NR___ G___ CF___ CH___

Summary of Basic Math Skills: Number yes Short total _____ Total red and black _____

*A___ Automatic Recall, D___ Delay in Automatic Recall, LD___ Long Delay, NR___ Number Relationship, G___ Guessing, CF___ Counting on Fingers, CH___ Counting in Head.

Math Skills

Page 6, Part 2

What is the purpose of this section?

The section is designed to assess the person's knowledge of arithmetic and higher math skills. Like the Basic Math Skills, this section is done orally rather than in writing.

What to look for?

Watch for the person stating that he or she does not have difficulty with various math operations. For example, if you suspect that the person does not know how to complete fraction operations, but he or she has stated that fractions are no problems, you can write an addition problem with mixed denominators and ask the person to complete the problem. This will show whether the person indeed knows how to complete such operations or just did not know what was meant by that math skill.

Special considerations:

If the person has difficulty with basic math skills, you can skip this section and mark the questions "yes". If the person has not taken algebra and other higher level math, mark these questions with "yes".

Math Skills

Was it difficult for you to learn long division?	Yes _____
Is it still difficult for you?	Yes _____
Was it difficult for you to learn fractions?	Yes _____
Is it still difficult for you?	Yes _____
Was it difficult for you to learn decimals?	Yes _____
Is it still difficult for you?	Yes _____
Was it difficult for you to learn percentages?	Yes _____
Is it still difficult for you?	Yes _____
Was it difficult for you to learn positive and negative numbers?	Yes _____
Is it still difficult for you?	Yes _____
Were word problems difficult?	Yes _____
Have you taken algebra? If yes, did you have difficulty with algebra?	Yes _____
Have you taken geometry? If yes, did you have difficulty with geometry?	Yes _____
Have you taken other math? _____ If yes, did you have difficulty with it?	Yes _____
Summary of Math Skills	Number Yes Total _____

Math Vocabulary

Page 6, Part 3

What is the purpose of this section?

The Math Vocabulary Section is designed to determine the person's understanding of math concepts.

What to look for?

Watch for the person who knows what the terms means but is unable to give a definition. You can have the person give an example or use the word in a sentence. Make a note about the person's difficulty defining terms.

Special considerations:

Individuals who are very young or have low academic ability, the administrator should use the optional terms. An example of an incorrect definition is *answer* for the word *equal*, or *letter* for the word *variable*.

There are five math terms to be defined. Ask the person to define or explain what each of the terms mean. Below are some examples of correct and incorrect responses. These are not the only possible responses. Mark "C" for correct if the person defines the word correctly. Mark "S" if the person is able to use the word correctly in a sentence. Mark "I" if the person uses the same word to define the word or does not know the meaning of the word.

Correct responses

Equal	Same
Average	Middle, leveling
Unit	One, whole
Variable	Something that changes
Compound Interest	Interest paid on interest and principle

Incorrect responses

Answer, sum
Add up and divide
A number
A number, a letter
Money the bank pays

Math Vocabulary

Does the person have difficulty defining: (For young children or adults with limited ability use the terms in parenthesis)
Mark "C" (correct) if the person can define the word. If the person cannot define the word but can use the word in a sentence, mark "S" (sentence). If the person cannot define the word, mark "I" (incorrect).

Equal	(Equal)	_____	C	___	S	___	I	___
Average	(Add)	_____	C	___	S	___	I	___
Unit	(Subtract)	_____	C	___	S	___	I	___
Variable	(Multiply)	_____	C	___	S	___	I	___
Compound Interest	(Divide)	_____	C	___	S	___	I	___

Summary of Math Vocabulary:

Short total "I" _____ Total "I" _____

*Automatic Recall__ Delay in Auto Recall__ Long Delay__ Number Relationship__
Guess__ Counting on Fingers__ Counting in Head__

Reading

Page 7, Part 1

What is the purpose of this section?

The first part of the reading section is to determine if the person enjoys reading or finds it a chore. The second part is to note reading errors that are common for individuals with reading problems.

What to look for?

Watch for frustration and try to reduce it by assuring the person that you need to observe the reading errors in order to understand the reading problem.

Special considerations:

Tell the person being screened that you are not interested in the words he or she knows, but rather you want to see what the person does with words that he or she does not know. This gives the person permission to make mistakes and reduces anxiety. The administrator should make an estimate of the person's reading ability based on the information obtained so far from the screening. Ask the individual to start on a particular line based on that estimate.

Reading

Do you read a lot or only what you have to? Only what you have to Yes ____
Do you like to read? dislikes reading Yes ____

Are you embarrassed to read out loud? Yes ____
Do you tilt your head when you read or study? Yes ____

Have the person read from the progressive reading list starting where you think the person will begin to have difficulty.

Does the person have poor word attack skills? Yes ____
Does the person have poor phonic skills? Yes ____
Does the person leave off word endings? Yes ____
Does the person add endings to words? Yes ____
Does the person leave off or change prefixes? Yes ____
Does the person misread many words? Yes ____

Have the person read something from a book, newspaper, magazine.

Does the person add words? Yes ____
Does the person skip words? Yes ____
Does the person evidence Flickering? (*misreading of "a-the", "in-on" etc.*) Yes ____
Does the person substitute words for similar words? Yes ____
Does the person read synonyms for some words? Yes ____
Does the person have difficulty pronouncing words? Yes ____
Does the person ignore punctuation? Yes ____
Does the person have a tracking problem? Yes ____
Does the person use a finger or a marker as a guide? Yes ____
Does the person skip lines? Yes ____

Summary of Reading: Number yes **Short total** ____ Total red and black ____

Reading Comprehension

Page 7, Part 2

What is the purpose of this section?

The Reading Comprehension Section is designed to identify problems with reading comprehension. It is not a traditional reading test but rather a self-assessment of what the person knows about his or her reading comprehension.

What to look for?

Watch for the person not understanding the questions and just responding to get past the questions. Try explaining the concepts in another way, and if the person still does not understand, make a note to that effect.

Special considerations:

The administrator does not have to ask the questions in this section if the individual has very low reading skills. Mark the questions as “yes” which will indicate a reading problem on the Screening Summary.

Reading Comprehension

- Do you have difficulty paraphrasing, or summarizing in your own words, what you read? Yes ____
- Do you find yourself reading whole pages without knowing what you read? Yes ____
- Are you distracted by some of the words on the page (Fireworks)? Yes ____
- Do you have difficulty identifying the main idea when you read? Yes ____
- Do you have difficulty finding details when you read? Yes ____
- Do you have difficulty going back and finding something that you read? Yes ____
- Are you easily distracted when you read? Yes ____
- Do you find reading textbooks difficult? Yes ____
- Do you find that there are many words you don't know the meaning of when you read? Yes ____
- Do you need to read things more than once? Yes ____

Summary of Reading Comprehension: Number yes Short total ____ Total red and black ____

Vocabulary

Page 8, Part 1

What is the purpose of this section?

The Vocabulary Section is designed to determine the person's understanding of the meaning of words and his/her ability to explain or define the words.

What to look for?

Watch for the person who appears to know the meaning of the word but is not able to give a definition. Ask the individual to use the word in a sentence or give an example of the concept. If the person can use the word in a sentence but is not able to define it, mark the "S". If the person is able to give an example of the concept associated with the word, make a note of it.

Special considerations:

When administering the Vocabulary Section, the administrator may decide to administer Set I and II or Set I, II, and III. Set I contains a list of concrete words. Set II contains a list of abstract words. Set III contains both concrete and abstract words. If the student begins to get frustrated as you move through Set II, mark the rest of the words as incorrect and use the scoring for the Set I and Set II. If the administrator wants a good sampling of vocabulary, all three sets of words can be administered. The administrator may use just Set I and Set II if s/he is using the long form. The scoring summary has been designed to score either combination. Documentation of what the individual states as the answer is valuable for diagnostic evaluation of this section.

Ask the person to define the words. Below are some examples of correct and incorrect responses. These are not the only possible responses. Mark "C" for correct if the person defines the word correctly. Mark "S" if the person is able to use the word correctly in a sentence. Mark "I" if the person uses the same word to define the word or does not know the meaning of the word.

	Correct responses	Incorrect responses
Set I		
LAKE	A body of water, pond	Ocean, river
REVERSE	Backwards, other way, opposite	Change direction, wrong way
DEVELOP	To grow, to process film, improve	Film, housing project, make up
CAUTION	Careful, danger, warn	Cautious, slow
NECESSARY	Important, must, need to	Necessarily
SECTION	Part, piece, divide, split	Seat, item, or unit
MOTIVE	Reason, why, purpose, drive	Cause, motivation, going for a goal, move forward
ARTIFICIAL	Fake, man-made, not real, false	Fossil, tool

Set II

PHILOSOPHY	One's idea, study of ideas	Subject in school, life style
INNOVATION	Something new, invention	Invitation, scientist
PRECISE	Exact, definite, meticulous	Neat, small, cut
THEORY	Thought, idea, opinion, model	Fact, truth
DILEMMA	Problem, choice, tight-spot	Idea, held up, delay
UNANIMOUS	All agree, all vote the same	No one agrees, a vote, someone unknown
ANTHROPOLOGY	Study of man/culture	Study of insects, bones, fossils
COLLECTIVE	Gathered together, joint, shared	Person who collects, collecting, to gather
Set III		
SLOW	Not fast, time-consuming	Walking, yield
CAPTURE	Catch, jail, describe, obtain, take	Hold, take a picture
SMOKE	Gas, exhaust, cloudy air	Cigarette, fire
BEAUTIFUL	Pretty, lovely, attractive	A specific person or thing
BIOLOGY	Study of life	A school subject, plants
PASSIVE	Laid back, not aggressive, still	Moving on, let slide, shy
DEDICATE	To commit, to give, devote	A song, a speech, put forth 100%
FOREIGN	From another country, strange	A car, a language
DEVISE	To plan, invent, make up	Telling someone what to do
RELUCTANT	Hesitant, don't want to	Stubborn, not working, lucky
TRANQUILIZE	To calm, to sedate	A pill, to give a shot, dosage
EXTENSIVE	Long, large, wide, broad	A cord, not easy, lots of research
CONTEMPLATE	To think, ponder	Not knowing, put off, to understand, can't decide
RENAISSANCE	Rebirth, historical period when Art and literature flourished	A historical period, art, old stuff, fair

Vocabulary

Does the person have difficulty defining the following words? There are three sets of words. Sets I and II are used for the short form; all three sets are used for the long form. They are for different age or ability groups or to provide the administrator with many words to check a person who evidences particular difficulty with vocabulary. Place a mark next to the "C" (correct) if the person can define the word. If the person cannot define the word but can use the word in a sentence, place a mark next to the "S" (sentence). If the person cannot define the word, place a mark next to the "I" (incorrect).

Set I

LAKE	_____	C ___	S ___	I ___
REVERSE	_____	C ___	S ___	I ___
DEVELOP	_____	C ___	S ___	I ___
CAUTION	_____	C ___	S ___	I ___
NECESSARY	_____	C ___	S ___	I ___
SECTION	_____	C ___	S ___	I ___
MOTIVE	_____	C ___	S ___	I ___
ARTIFICIAL	_____	C ___	S ___	I ___

Set II

PHILOSOPHY	_____	C ___	S ___	I ___
INNOVATION	_____	C ___	S ___	I ___
PRECISE	_____	C ___	S ___	I ___
THEORY	_____	C ___	S ___	I ___
DILEMMA	_____	C ___	S ___	I ___
UNANIMOUS	_____	C ___	S ___	I ___
ANTHROPOLOGY	_____	C ___	S ___	I ___
COLLECTIVE	_____	C ___	S ___	I ___

Set III

SLOW	_____	C ___	S ___	I ___
CAPTURE	_____	C ___	S ___	I ___
SMOKE	_____	C ___	S ___	I ___
BEAUTIFUL	_____	C ___	S ___	I ___
BIOLOGY	_____	C ___	S ___	I ___
PASSIVE	_____	C ___	S ___	I ___
DEDICATE	_____	C ___	S ___	I ___
FOREIGN	_____	C ___	S ___	I ___
DEVISE	_____	C ___	S ___	I ___
RELUCTANT	_____	C ___	S ___	I ___
TRANQUILIZE	_____	C ___	S ___	I ___
EXTENSIVE	_____	C ___	S ___	I ___
CONTEMPLATE	_____	C ___	S ___	I ___
RENAISSANCE	_____	C ___	S ___	I ___

Is the person's vocabulary underdeveloped? Yes ___

Is the person's vocabulary ambiguous? Yes ___

Does the person define with another part of speech? (e.g. tranquilize - pill) Yes ___

Summary of Vocabulary:

Level I Number "C" ___ Number "S" ___
 Level II Number "C" ___ Number "S" ___

The total "I" (both red and black) + the Number of Yes ___

Avoidance

Page 9, Part 1

What is the purpose of this section?

The purpose of the Avoidance Section is to identify if there are any areas of the person's life or schooling which are avoided.

What to look for?

Watch for the person not understanding the questions. If the individual appears confused, give a few examples of avoidance such as a person who dislikes sports avoids playing and watching sports.

Special considerations:

Although we all avoid something, it may not be significant or part of our consciousness. So if the person cannot think of anything, move on. If the person reports getting angry or frustrated by school or learning, note what the person gets upset about. For example, the person might state the he or she gets angry when teachers do not explain things enough or gets frustrated when he or she does not understand as quickly as everyone else.

Avoidance

Is there anything or are there any activities that you completely avoid?

Yes ____

If yes, what? _____

Is there anything you are very fearful of in any area of your life?

Yes ____

If yes, what? _____

Is there anything, in any area of your life, you really dislike to do?

Yes ____

If yes, what? _____

Is there anything, in any area of your life, that you are unable to do?

Yes ____

If yes, what? _____

Are there any school (academic) subjects you are fearful of?

Yes ____

If yes, what? _____

Are there any school (academic) subjects you really dislike?

Yes ____

If yes, what? _____

Are there any school (academic) subjects that you are unable to do?

Yes ____

If yes, what? _____

Do you ever get angry about school work?

Yes ____

If yes, about what? _____

Angry with: myself _____ the subject matter _____ teachers _____ school _____

Do you or did you clown around a lot in school?

Yes ____

If yes, because you were:

Good at it _____ bored _____ distracting people from your school work _____

Summary of Avoidance

Number Yes Total ____

GOALS

Page 9, Part 2

What is the purpose of this section?

The purpose of the Goals Section is to determine if the person has plans for the future and whether they are realistic.

What to look for?

Watch for very unrealistic goals or plans which might be negatively affected by the learning differences which the person exhibits.

Special considerations:

This is an optional section which may not be appropriate for young children or adults who are not interested in making changes in their lives.

Optional Section GOALS

What are your goals? Short Range _____

Long Range _____

What do you want from this assessment? _____

What are your career plans? _____

Do you plan to continue your education? How? _____

Where? _____

What is the purpose of this section?

The purpose of the Progressive Reading List is to evaluate the level of the person's reading and note the types of errors, if any.

What to look for?

Watch for reversals or the mis-reading of words which are similar, the dropping, changing or adding of prefixes and suffixes, mispronunciations,

Special considerations: The words the person can read with ease are not important to this section so the administrator does not need to have the person read all the words on this page. For example a college student who has requested the screening because of a math problem may be asked to read the last five lines. If no errors were noted, it can be assumed that the person can read all the words on the page. However, if that same student struggles with the words on line 19, the administrator should ask the person to read some of the previous lines and note any errors. Another example would be the person referred for a screening because of a reading problem. The administrator should begin with the first line and if no errors are observed skip a couple of lines. Continue in this manner until the person exhibits errors. Make note of those errors and provide the person with hints about the words which the person does not know. Make notes as to how the person does with these hints. For example if the person does not recognize or cannot decode the word *shark* on line 4, tell the person that *it lives in the ocean*. This context clue is enough for some readers to recognize the word. Mark a *C* above the word to indicate that the person got the word with a context clue. If the person still does not know the word, put an *x* on the *C* and give another hint like *it lives in the ocean and might bite swimmers*. If the person gets the word with this clue mark another *C*. If the person still does not know the word mark an *x* on the second *C* and move to the next word. Another example of help would be to give the person the initial sound of the word. If such a hint is used mark an *H* (for Help) if the person is able to read the word. If the person is not able to read the word with this hint, place an *x* on the *H*.

If the person mis-reads a word, write the word the person said above the word. An example would be reading *went* for *want* or *play* for *pay*.

These notes will help the administrator understand the person's reading problems when the screening summary is being prepared.

Using and Scoring the Progressive Reading List

The Progressive Reading List is used for error analysis. You can tell the person being screened that the purpose for reading the list is to find out the types of difficulties he or she might have reading words.

It is not necessary to have the client read every word on the page. Individuals who report having little or no problem reading can be asked to read a couple of lines at the bottom of the page to demonstrate that they in fact have good reading skills. Individuals who report significant difficulties with reading should start with the first line. If the person can read it with no errors, skip a line or two and have the person read that line. If there are no errors, continue skipping lines until the person makes errors or hesitates when attempting to read a word. If the administrator is not sure about the person's reading skills, have the client start at the first line and skip lines to find where the person encounters difficulty.



When scoring the progressive Reading List, count words that were skipped over by the administrator as correct and words that the person did not read correctly as incorrect. The words that the person reads correctly with little or no hesitation are left without any marks, indicating that the person read the word correctly. When the person starts making errors there are options as to how to mark them wrong. Those who are just starting using the C-SIP may want to keep it simple and make few marks to indicate the type of error. Those who are comfortable with and have had a lot of experience with the C-SIP may be interested in making more marks to track exact errors that the student made. Both options are listed below. For the Advanced Error Markings, use the Simple Error Markings as well as the Advanced. These scoring marks are meant to add more consistency to the screening, but you may feel free to pick and choose which of the suggested error markings you want to use, and you can make your own marks if they make more sense to you.

There is sometimes a fine line between correct and incorrect. If the person reads a different word than is written the word is incorrect, this may be a difference of just one letter. If the person drops or adds an ending to the word, but the main root of the word is correct than the word is correct. You may give the person context clues and hints, but if after one hint the person does not get the word, mark it incorrect. The purpose of this screening is not to frustrate people, and people make more errors as they get more frustrated. Sometimes is the helpful to give hints with words that people are particularly frustrated with to make the reading go smoother, and to get a more correct scoring of words they do know, you may give rhyming hints or multiple hints and context clues, but score the word incorrect. If a person hesitates, sounds out the word, or initially gets it wrong, but corrects herself, mark these words as correct. It may be helpful to mark the total number correct at the end of each line and then total the lines for the complete score.

Simple Error Markings for Progressive Reading List

1. Make a mark on the number of each line that the person reads to remember which lines were read.
2. If the person reads a different word than the one on the page, write what the person said above the word and score the word as incorrect.
3. Place an X over a word that the person does not know or reads incorrectly.
4. If you provide assistance such as context clues or hints mark an "H" above the word, if the person gets the word right after one hint mark the word correct, if you need to give more hints, mark an "H" for each hint, but mark the word as wrong. This is drawn out more in the Advanced Error Markings, but a simple "H" will work.

Advanced Error Markings for Progressive Reading List

1. If the person does not know a word and does not evidence decoding skills, the administrator can give a context clue and mark a C above the word. If the person reads the word correctly with the context clue, leave the C (for context) above the word as is. If the person is not able to read the word with the clue, mark an x over the C. If you give more than one context clue, mark a C for each and an X over each C the person can't use to figure out the word. Count the word as correct if the person was able to read the word with the assistance of one of the context clues.
2. Some words in the list can be easily rhymed such as the word *much*. You can give the person a rhyming clue such as "It rhymes with *such*." Mark "rhy" above the word and consider it correct if the person is able to use the clue to read the word. If the person is not able to use the rhyming clue, place an X over the "rhy" marking the word as incorrect.
3. If you provide other types of assistance such as giving the person the initial sound of the word etc., mark an H above the word. If you give more help, mark an H for each clue (other than a context clue) you give. Mark an X over the H if the person is not able to use the assistance or clue. If the person is able to read the word with a little help, mark the word as correct. If he or she needs a lot of help, mark the word as incorrect.
4. If the person hesitates when reading a word or takes some time to decode a word, make a mark such as ~ under the word as a reminder that the person does not know the word as a sight word. Score the word as correct.
5. If the person obviously sounds out the word, mark "s o" (for sound out) and consider the word correct.
6. If the person does not pronounce the word correctly but comes close, mark "pro" over the word and score the word as incorrect.
7. These additional markings can be used to remember minor errors that the person made; use your judgment on whether the errors are enough to make the score incorrect.
 - a.  This mark can be used to indicate that a person left off part of a word.
 - b.  This mark can be used to indicate that a person misread a part of a word.
 - c. If a person reads a word incorrectly because of a single letter such as **give** for **gave**, write that letter above the word and score it as incorrect.
 - d. If the person adds letters to the word, such as s, ed, or ing, write the added letters on the word but mark the word correct.
 - e. If the person reads a word incorrectly but corrects himself, mark sc (for self corrected) above the word and consider the word correct.

What is the purpose of this section?

This page is designed to obtain a sample of the person's handwriting without lines to guide the writing. See Appendix for samples of individuals' handwriting.

What to look for ?

- Unusually sized letters
- Illegible handwriting
- Too much or too little spacing between letters or numbers
- Slanting up or down
- Triggers (thinking a number or letter and writing the next one)
- Incomplete sentence
- Misspellings
- Incomplete or mis-ordered alphabet
- Hesitation or orally repeating the alphabet
- Extra or repeated letters in the alphabet
- Writing to the edge of the page
- Missing numbers
- Writing the second number before the one for teen numbers
- Drawing which is very sophisticated or very simple
- Drawing which is oversized or runs into other things
- Drawing which is unusual, has strange perspective or shape

Special Considerations:

These errors are usually reflections of the weaknesses and phenomena which correspond to the other sections in this screening. For example poor handwriting corresponds to Motor Skills and reversals to Right/Left Discrimination.

Observations, Notes

Page 12

On this page the administrator can note any unusual behaviors, talents, attitudes and any other information which the person may exhibit or provide. Some examples would include:

Talking too much or having trouble staying on the topic.

Distracted by the surroundings

Becoming hostile

Refuses to cooperate

Crying or being upset when responding to a particular question

Good art or music ability

Observation, Notes

What is the purpose of this section?

The purpose of this page is to obtain a profile of the person's thoughts and basic skills. This summary does not provide a numerical score but rather a visual profile of the number of marks in the columns. See the appendix for copies of completed screening summaries.

How to Score the Cooper Screening of Information Processing

Add up the yes answers in each section and place a mark in the appropriate column. Individuals with severe or significant learning problems will have many marks in the right hand column. Individuals with less significant problems or learning differences will have more marks in the left hand or middle column. Individuals who have few marks on the screening summary probably do not have a learning difference, problem or disability.

Since the screening is not a diagnostic instrument for learning disabilities but rather a first step in a process which might lead to a diagnosis of a disability, individuals who have many marks in the right hand column or individuals with a "scattered" pattern of marks should be referred for further testing.

C-SIP Screening Summary

Name _____ Date _____

Educational History	3 – 4 _____	5 – 6 _____	7 – 9 _____
Attention	2 – 3 _____	4 – 6 _____	7 – 10 _____
Motor Skills	2 – 3 _____	4 – 6 _____	7 – 8 _____
Auditory	2 – 3 _____	4 – 6 _____	7 – 10 _____
Right/Left Discrimination	3 – 5 _____	6 – 8 _____	9 – 13 _____
Organizational Skills	1 – 2 _____	3 – 4 _____	5 – 8 _____
Employment	1 _____	2 – 3 _____	4 – 5 _____
Emotional	2 – 3 _____	4 – 5 _____	6 – 10 _____
Social and Family	3 – 4 _____	5 – 6 _____	7 – 9 _____
Oral Communication	1 – 2 _____	3 – 4 _____	5 – 6 _____
Writing Skills	2 – 4 _____	5 – 7 _____	8 – 12 _____
Handwriting	2 – 3 _____	4 – 6 _____	7 – 10 _____
Basic Math Skills		1 – 2 _____	3 – 5 _____
Math Skills	1 – 2 _____	3 – 6 _____	7 – 14 _____
Math Vocabulary	1 _____	2 – 3 _____	4 – 5 _____
Reading Skills	3 – 7 _____	8 – 12 _____	13 – 20 _____
Reading Comprehension	3 – 4 _____	5 – 6 _____	7 – 10 _____
Vocabulary			
Set I & II	2 – 4 _____	5 – 9 _____	10 – 16 _____
Set I, II & III	4 – 13 _____	14 – 23 _____	24 – 33 _____
Avoidance	2 – 3 _____	4 – 6 _____	7 – 9 _____
Reading List*			
	26-50 _____	11 – 25 _____	0 – 10 _____
	100–116 _____	21 – 99 _____	1 – 20 _____

Educational/Employment Plan

Page 14 -- Part 1

What is the purpose of this section?

The purpose of the Educational and Employment Plan page is to have a place to write down some initial impressions of the person's plan.

Educational/Employment Plan

Reading

Spelling

Writing

Vocabulary

Math

Organization

Study Skills

Adaptations/Modifications/Assistive Devices

Page 14 -- Part 2

What is the purpose of this section?

The purpose of the Adaptations/Modifications/Assistive Devices page is to have a place to write down some initial impressions of what types of assistance the person may need.

Adaptations/Modifications/Assistive Devices

Appendix

Handwriting Samples and Screening Summaries

This is the handwriting sample of Alex, an 8 year old boy. It took him a long time to write the alphabet and numbers. The small letters *e*, *g*, *m*, *n*, and *o* reflect his attention problems, losing concentration, which corresponds his score on the attention section. The *z* reflects his right/left discrimination problem which is moderate not severe.

This is the handwriting sample of Aimee, a 22 year old female. The only problem which appears on the handwriting sample is a minor problem with spacing between letters and numbers. This is the result of her writing very quickly. Her difficulties include attention and right/left discrimination problems. These also have reduced her math skills and ability to express herself in writing.

This is the handwriting sample of Debbie, a 32 year old female. Note the incomplete sentence and alphabet. Her screening summary indicate a significant learning problem in most areas except for motor skills, thus legible handwriting but very weak basic skills except in reading.

This is the handwriting sample of Chris, a 49 year old male who has a significant reading problem. Note that there is no sentence because the administrator realized that the person's writing skills were so low that he would not be able to write a sentence. The alphabet is incomplete. The screening summary indicated a limited education and a significant auditory problem. The errors on the numbers were probably the result of his writing the numbers quickly after being frustrated by the alphabet.

This is the handwriting sample of Doris, a 50 year old female who has a significant reading problem. She did write a sentence but her ability to express herself in writing is very limited. The alphabet was incomplete because the administrator saw the person was very frustrated. The screening summary shows a limited education, auditory problems, difficulties with oral communication and weak basic academic skills. This person has worked very little during her life because of her limited skills.

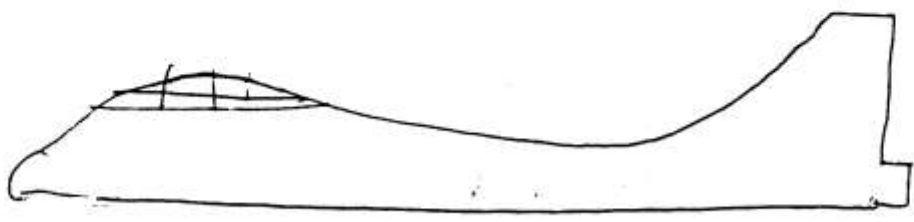
Handwriting Sample Page

Alex
alex



Monkeys eat ice cream

A B C D E F G H I J
K L M N O P Q R S T
U V W X Y Z
1 2 3 4 5 6 7 8 9
10 11 12 13 14 15 16
17 18 19 20



Screening Summary

Name Alex Date _____

Educational History	3 - 4 <input checked="" type="checkbox"/>	5 - 6 _____	7 - 9 _____
Attention	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Motor Skills	2 - 3 _____	4 - 6 _____	7 - 8 _____
Auditory	2 - 3 _____	4 - 6 <input checked="" type="checkbox"/>	7 - 10 _____
Right/Left Discrimination	3 - 5 _____	6 - 8 <input checked="" type="checkbox"/>	9 - 13 _____
Organizational Skills	1 - 2 _____	3 - 4 _____	5 - 8 <input checked="" type="checkbox"/>
Employment	1 _____	2 - 3 _____	4 - 5 _____
Emotional	2 - 3 <input checked="" type="checkbox"/>	4 - 5 _____	6 - 10 _____
Social and Family	3 - 4 _____	5 - 6 _____	7 - 9 _____
Oral Communication	1 - 2 <input checked="" type="checkbox"/>	3 - 4 _____	5 - 6 _____
Writing Skills	2 - 4 _____	5 - 7 _____	8 - 12 <input checked="" type="checkbox"/>
Handwriting	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Basic Math Skills		1 - 2 <input checked="" type="checkbox"/>	3 - 5 _____
Math Skills	1 - 2 _____	3 - 6 _____	7 - 14 _____
Math Vocabulary	1 _____	2 - 3 _____	4 - 5 _____
Reading Skills	3 - 7 <input checked="" type="checkbox"/>	8 - 12 _____	13 - 20 _____
Reading Comprehension	3 - 4 <input checked="" type="checkbox"/>	5 - 6 _____	7 - 10 _____
Vocabulary	2 - 3 _____	5 - 6 _____	7 - 13 _____
Avoidance	2 - 3 _____	4 - 6 _____	7 - 9 _____
Reading List (Number correct or with little hesitation)			
	100 - 126 _____	21 - 99 <input checked="" type="checkbox"/>	1 - 20 _____

Handwriting Sample Page

Aimee [REDACTED]

Aimee [REDACTED]

I'm here to see Dr. Cooper today because
I'm not passing my nursing exams.

ABCDEFGHIJKLMNOPQRSTUVWXYZ
123456789101112131415161718
19 20



Screening Summary

Name Aimee Date _____

Educational History	3 - 4 <input checked="" type="checkbox"/>	5 - 6 _____	7 - 9 _____
Attention	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Motor Skills	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 8 _____
Auditory	2 - 3 _____	4 - 6 <input checked="" type="checkbox"/>	7 - 10 _____
Right/Left Discrimination	3 - 5 _____	6 - 8 _____	9 - 13 <input checked="" type="checkbox"/>
Organizational Skills	1 - 2 <input checked="" type="checkbox"/>	3 - 4 _____	5 - 8 _____
Employment	1 _____	2 - 3 _____	4 - 5 _____
Emotional	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>	6 - 10 _____
Social and Family	3 - 4 _____	5 - 6 _____	7 - 9 _____
Oral Communication	1 - 2 <input checked="" type="checkbox"/>	3 - 4 _____	5 - 6 _____
Writing Skills	2 - 4 _____	5 - 7 _____	8 - 12 <input checked="" type="checkbox"/>
Handwriting	2 - 3 _____	4 - 6 _____	7 - 10 _____
Basic Math Skills		1 - 2 <input checked="" type="checkbox"/>	3 - 5 _____
Math Skills	1 - 2 _____	3 - 6 _____	7 - 14 <input checked="" type="checkbox"/>
Math Vocabulary	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Reading Skills	3 - 7 <input checked="" type="checkbox"/>	8 - 12 _____	13 - 20 _____
Reading Comprehension	3 - 4 _____	5 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Vocabulary	2 - 3 _____	5 - 6 <input checked="" type="checkbox"/>	7 - 13 _____
Avoidance	2 - 3 _____	4 - 6 <input checked="" type="checkbox"/>	7 - 9 _____
Reading List (Number correct or with little hesitation)			
	100 - 126 <input checked="" type="checkbox"/>	21 - 99 _____	1 - 20 _____

Handwriting Sample Page

Debbie [REDACTED]

Debbie [REDACTED]

To find out why I have trouble with math

ABCDEFGHIJKLMN OPQRSTUVWXYZ

12345678910 11 12 13 14 15 16 17 18 19 20

EB

Screening Summary

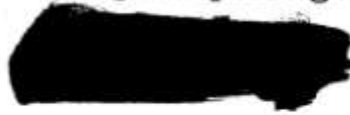
Name Debbie Date _____

Educational History	3 - 4 _____	5 - 6 _____	7 - 9 <input checked="" type="checkbox"/>
Attention	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Motor Skills	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 8 _____
Auditory	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Right/Left Discrimination	3 - 5 _____	6 - 8 _____	9 - 13 <input checked="" type="checkbox"/>
Organizational Skills	1 - 2 _____	3 - 4 _____	5 - 8 <input checked="" type="checkbox"/>
Employment	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Emotional	2 - 3 _____	4 - 5 _____	6 - 10 <input checked="" type="checkbox"/>
Social and Family	3 - 4 _____	5 - 6 _____	7 - 9 <input checked="" type="checkbox"/>
Oral Communication	1 - 2 _____	3 - 4 _____	5 - 6 <input checked="" type="checkbox"/>
Writing Skills	2 - 4 _____	5 - 7 _____	8 - 12 <input checked="" type="checkbox"/>
Handwriting	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 10 _____
Basic Math Skills		1 - 2 _____	3 - 5 <input checked="" type="checkbox"/>
Math Skills	1 - 2 _____	3 - 6 _____	7 - 14 <input checked="" type="checkbox"/>
Math Vocabulary	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Reading Skills	3 - 7 <input checked="" type="checkbox"/>	8 - 12 _____	13 - 20 _____
Reading Comprehension	3 - 4 _____	5 - 6 <input checked="" type="checkbox"/>	7 - 10 _____
Vocabulary	2 - 3 _____	5 - 6 <input checked="" type="checkbox"/>	7 - 13 _____
Avoidance	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 9 _____

Reading List (Number correct or with little hesitation)
 100 - 126 21 - 99 _____ 1 - 20 _____

Handwriting Sample Page

CHRISTY



Christy



A B C D E F G H I J L O P R

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20



Screening Summary

Name Chris Date _____

Educational History	3 - 4 _____	5 - 6 _____	7 - 9 <input checked="" type="checkbox"/>
Attention	2 - 3 _____	4 - 6 _____	7 - 10 _____
Motor Skills	2 - 3 _____	4 - 6 _____	7 - 8 _____
Auditory	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Right/Left Discrimination	3 - 5 _____	6 - 8 <input checked="" type="checkbox"/>	9 - 13 _____
Organizational Skills	1 - 2 _____	3 - 4 _____	5 - 8 _____
Employment	1 _____	2 - 3 _____	4 - 5 _____
Emotional	2 - 3 <input checked="" type="checkbox"/>	4 - 5 _____	6 - 10 _____
Social and Family	3 - 4 <input checked="" type="checkbox"/>	5 - 6 _____	7 - 9 _____
Oral Communication	1 - 2 _____	3 - 4 <input checked="" type="checkbox"/>	5 - 6 _____
Writing Skills	2 - 4 _____	5 - 7 _____	8 - 12 <input checked="" type="checkbox"/>
Handwriting	2 - 3 _____	4 - 6 <input checked="" type="checkbox"/>	7 - 10 _____
Basic Math Skills		1 - 2 _____	3 - 5 <input checked="" type="checkbox"/>
Math Skills	1 - 2 _____	3 - 6 _____	7 - 14 <input checked="" type="checkbox"/>
Math Vocabulary	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Reading Skills	3 - 7 _____	8 - 12 _____	13 - 20 <input checked="" type="checkbox"/>
Reading Comprehension	3 - 4 _____	5 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Vocabulary	2 - 3 _____	5 - 6 <input checked="" type="checkbox"/>	7 - 13 _____
Avoidance	2 - 3 _____	4 - 6 _____	7 - 9 _____
Reading List (Number correct or with little hesitation)			
	100 - 126 _____	21 - 99 _____	1 - 20 <input checked="" type="checkbox"/>

DORIS [REDACTED]

Doris [REDACTED]

I have read work.

a B C D E

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20



Screening Summary

Name Doris Date _____

Educational History	3 - 4 _____	5 - 6 _____	7 - 9 <input checked="" type="checkbox"/>
Attention	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 10 _____
Motor Skills	2 - 3 <input checked="" type="checkbox"/>	4 - 6 _____	7 - 8 _____
Auditory	2 - 3 _____	4 - 6 _____	7 - 10 <input checked="" type="checkbox"/>
Right/Left Discrimination	3 - 5 _____	6 - 8 <input checked="" type="checkbox"/>	9 - 13 _____
Organizational Skills	1 - 2 <input checked="" type="checkbox"/>	3 - 4 _____	5 - 8 _____
Employment	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Emotional	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>	6 - 10 _____
Social and Family	3 - 4 <input checked="" type="checkbox"/>	5 - 8 _____	9 - 11 _____
Oral Communication	1 - 2 _____	3 - 4 _____	5 - 6 <input checked="" type="checkbox"/>
Writing Skills	2 - 4 _____	5 - 7 _____	8 - 12 <input checked="" type="checkbox"/>
Handwriting	2 - 3 _____	4 - 6 <input checked="" type="checkbox"/>	7 - 9 _____
Basic Math Skills		1 - 2 _____	3 - 5 <input checked="" type="checkbox"/>
Math Skills	1 - 2 _____	3 - 6 _____	7 - 14 <input checked="" type="checkbox"/>
Math Vocabulary	1 _____	2 - 3 _____	4 - 5 <input checked="" type="checkbox"/>
Reading Skills	3 - 7 _____	8 - 12 _____	13 - 20 <input checked="" type="checkbox"/>
Reading Comprehension	3 - 4 _____	5 - 6 _____	7 - 9 <input checked="" type="checkbox"/>
Vocabulary	2 - 3 _____	4 - 6 _____	7 - 12 <input checked="" type="checkbox"/>
Avoidance	3 - 4 _____	5 - 7 _____	8 - 9 _____
Reading List (Number correct or with little hesitation.)			
	100 - 126 _____	21 - 99 _____	1 - 20 <input checked="" type="checkbox"/>