

8-12 months:

Does your child:

Yes No

Cognition

- | | | |
|--|--------------------------|--------------------------|
| • Play 2-3 minutes with a single toy? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Search for hidden sounds? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Begin to use objects correctly?
(e.g. drinking from cup, brushing hair, dialing phone, listening to receiver) | <input type="checkbox"/> | <input type="checkbox"/> |
| • Enjoy imitating people in play? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Explore objects in many different ways?
(e.g. shaking, banging, throwing, dropping) | <input type="checkbox"/> | <input type="checkbox"/> |

Speech and Language

Receptive Language

- | | | |
|--|--------------------------|--------------------------|
| • Enjoy games like “Peek-a-boo” and “Pat-a-cake”? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Turn his/her head and/or body and look in direction of sounds? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Listen to the speech of others? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Recognize words for common items like “bottle,” “ball,” “shoe” or “book”? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Respond to familiar requests? Responding to requests without needing cues
(e.g. “Give” with open palm held out, “Come here” while holding arms when you’re about to pick them up, or “Give kiss” as you lean your cheek in close to the child.) | <input type="checkbox"/> | <input type="checkbox"/> |

Expressive Language

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|---|--------------------------|--------------------------|
| • Babbling consonant chains? (e.g. “puh-puh-puh,” “bi-bi-bi” or “oy” as in boy) | <input type="checkbox"/> | <input type="checkbox"/> |
| • Double consonants (e.g. “ba-ba”) or single consonant (e.g. “ba”)? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Use speech or non-crying sounds to gain and keep attention? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Imitate different speech sounds? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Produce one or two words (e.g. “hi” “dog” “dada” “mama”) around 1 st birthday?
Although sounds may not be perfectly clear | <input type="checkbox"/> | <input type="checkbox"/> |

Occupational Therapy

- | | | |
|--|--------------------------|--------------------------|
| • Bang toys together at the middle of the body? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Put objects into a container? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Remove pegs from pegboard/puzzle pieces from a puzzle? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Rake small items from a surface? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Finger-feed? | <input type="checkbox"/> | <input type="checkbox"/> |

Physical Therapy

- | | | |
|--|--------------------------|--------------------------|
| • Move into and out of sitting without help? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Crawl – first on belly, then all 4s? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Pull to standing at furniture? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Walk – holding onto furniture; may take a few independent steps? | <input type="checkbox"/> | <input type="checkbox"/> |

Social and Emotional

	<u>Yes</u>	<u>No</u>
• Actively play peek-a-boo?	<input type="checkbox"/>	<input type="checkbox"/>
• Show anxiety when separating from a parent?	<input type="checkbox"/>	<input type="checkbox"/>
• Show preferences in their familiar environment?	<input type="checkbox"/>	<input type="checkbox"/>
• Begin to test parental reaction?	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: This information represents, on average, the age by which most children will accomplish the listed milestones. Children do not typically master all items until they reach the upper end of that age range. Just because your child has not yet accomplished a skill within an age range does not mean they have a disorder. However, if you have answered ‘no’ to the majority of items within an age range, or continue to have concerns, it is recommended that a thorough assessment of abilities be completed. For more information about an evaluation of your child, please contact The Bell Center’s Executive Director, Jeannie Colquett at 870-0081 or jcolquett@thebellcenter.org