

The Listening Fitness™ Program Listening Questionnaire for Children

Name of the child: Age: Date
Completed by:

Please complete the following questionnaire: Tab to the appropriate answer and type an 'x' in the box, or use the mouse to click an 'x' into the box you want. To delete an 'x' use the mouse and click on it.

- N/A = not applicable (e.g. child is too young)
- 0 = never or rarely
- 1 = sometimes
- 2 = often
- 3 = always

1	N/A	0	1	2	3
• Tends to put volume lower (audio devices, T.V. etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is overly sensitive or irritated by certain sounds (complains that some voices/music "hurt" him/her)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Is overly distracted by ambient noises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Tends to hum or make involuntary voice noises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Easily overwhelmed by sound/verbal information - tends to "blank out" or yawn (Information overload)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Tends to hear unusually faint sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2	N/A	0	1	2	3
• Needs instruction repeated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Tends to put volume higher (audio devices, T.V. etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Has difficulty remembering names	N/A	0	1	2	3
• Fidgets specifically when listening	N/A	0	1	2	3
• Has difficulty following multiple instructions	N/A	0	1	2	3
• Has short attention span in the classroom	N/A	0	1	2	3
• Has long delay time before responding to questions	N/A	0	1	2	3
• Has difficulty in remembering melodies	N/A	0	1	2	3
• Performs better in a quiet environment	N/A	0	1	2	3

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• In reading, has difficulty converting letters into sounds (decoding)	N/A	0	1	2	3
• Reads slowly	N/A	0	1	2	3
• Needs the support of an image to understand what he/she reads	N/A	0	1	2	3
• Tires easily when reading ("my eyes get tired")	N/A	0	1	2	3
• In math - good in calculation but has difficulty with word problems	N/A	0	1	2	3
• Views reading as a "boring" activity	N/A	0	1	2	3

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• Has difficulty understanding math concepts	N/A	0	1	2	3
• Needs to underline with finger when reading	N/A	0	1	2	3
• Can read the words but poor comprehension	N/A	0	1	2	3
• Reverses letters/words when reading	N/A	0	1	2	3
• Reacts to reading with discomfort	N/A	0	1	2	3
• Has difficulty catching a ball	N/A	0	1	2	3

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• Has difficulty with balance (i.e. learning to ride a bike or to skate or roller blade)	N/A	0	1	2	3
• Has poor posture	N/A	0	1	2	3
• Has difficulty sitting still, tends to fidget	N/A	0	1	2	3
• Has low muscle tone	N/A	0	1	2	3
• Tends to stumble, trip, bump into things and/or to be accident prone	N/A	0	1	2	3
• Tends to misread non-verbal cues	N/A	0	1	2	3
• Confuses left and right	N/A	0	1	2	3
• Has a poor sense of direction	N/A	0	1	2	3
• Has difficulty following time schedules	N/A	0	1	2	3
• Tends to learn "in spurts" rather than in a continuous flow	N/A	0	1	2	3
• Has craving for movement (trampoline, swings, pacing)	N/A	0	1	2	3
• Has difficulty learning times tables	N/A	0	1	2	3

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• Fears or feels uncomfortable in darkness	N/A	0	1	2	3
• Feels uncomfortable in high places (fear of heights, fear of falling)	N/A	0	1	2	3
• Tends to shy away from and/or be uncomfortable with physical contact	N/A	0	1	2	3
• Has difficulty with busyness (crowded classroom, playground, shopping mall etc.)	N/A	0	1	2	3
• Finds it difficult adjusting to a new environment or situation	N/A	0	1	2	3
• Is prone to motion sickness (rides, spinning, car)	N/A	0	1	2	3

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• Tends to overreact or to be overly defensive or unpredictable (short temper, "thin skin")	N/A	0	1	2	3
• Tends to seek attention by whining, crying, complaining	N/A	0	1	2	3
• Tends to shy away from physical activity (sports)	N/A	0	1	2	3
• Is overly shy or self-conscious in public	N/A	0	1	2	3
• Feels uncomfortable or fearful participating in group activities or sports	N/A	0	1	2	3
• "Freezes" or "blanks out" when asked to speed up (i.e. when under a time constraint)	N/A	0	1	2	3

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• Is uncoordinated in his/her movements (clumsy, awkward)	N/A	0	1	2	3
• Has a poor sense of rhythm (i.e. has difficulty repeating rhythmic pattern or dancing)	N/A	0	1	2	3
• Has difficulty getting organized	N/A	0	1	2	3
• Has difficulty staying on task	N/A	0	1	2	3
• Has difficulty planning a series of tasks to be carried out (sequencing)	N/A	0	1	2	3
• Speaks with poor sentence structure	N/A	0	1	2	3
• Has poor gross motor skills (i.e. difficulty swimming, jumping, running)	N/A	0	1	2	3
• Procrastinates ("all talk, no action")	N/A	0	1	2	3
• Is attracted by computer games and/or other activities which ask for attention to small details	N/A	0	1	2	3
• Has difficulty relating to the peer group (making friends)	N/A	0	1	2	3
• Speech flow is choppy (hesitation, redundant speech, verbal ticks)	N/A	0	1	2	3
• When talking, has difficulty maintaining coherent and consistent story line	N/A	0	1	2	3

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• Confuses or reverses letters/numbers in writing	N/A	0	1	2	3
• In spelling, tends to write words as they sound (misteak/mistake, bol/ball, nacher/nature)	N/A	0	1	2	3
• Has difficulty with eye-hand coordination in sports (throwing a ball)	N/A	0	1	2	3
• Has messy handwriting	N/A	0	1	2	3
• When writing has difficulty with constructing sentences (grammar, syntax)	N/A	0	1	2	3
• Has difficulty copying from the blackboard	N/A	0	1	2	3

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• When reading out loud has difficulty pronouncing words	N/A	0	1	2	3
• Has poor expression & a tendency to mumble when reading out loud	N/A	0	1	2	3
• When writing tends to misspell the words that sound similar (cheap, sheep, ship, chip)	N/A	0	1	2	3
• Has difficulty with note taking	N/A	0	1	2	3
• Can have a good mark on an oral spelling test but can not apply when writing	N/A	0	1	2	3
• Has a limited vocabulary in creative writing	N/A	0	1	2	3

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• Tends to speak too loudly	N/A	0	1	2	3
• When speaking, mispronounces similar sounding words	N/A	0	1	2	3
• Speaks using ready-made sentences (i.e. general, cliché - "stuff like that", "whatever")	N/A	0	1	2	3
• Has a monotone voice	N/A	0	1	2	3
• Has weak vocabulary when speaking	N/A	0	1	2	3
• Tends to fidget when speaking	N/A	0	1	2	3
• When speaking, has difficulty finding the right word ("I have it on the tip of my tongue")	N/A	0	1	2	3

• Has slow/hesitant speech	N/A	0	1	2	3
• Has difficulty spelling words out loud	N/A	0	1	2	3
• Tends to “act out” of frustration of not being able to “speak out”	N/A	0	1	2	3
• Has a poor singing voice	N/A	0	1	2	3
• When speaking, the intonation of the voice doesn't suit the meaning of the message	N/A	0	1	2	3

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• Tends to speak too softly	N/A	0	1	2	3
• Has a tendency to talk to him/herself during play or when on his own.	N/A	0	1	2	3
• Avoids/shies away from verbal interaction/discussions	N/A	0	1	2	3
• When anxious or upset tends to freeze and lose capacity to argue his/her point	N/A	0	1	2	3
• Dislikes talking/singing/performing in public	N/A	0	1	2	3
• Tends to apologize, gives the impression that his/her input is an intrusion	N/A	0	1	2	3

Thank You