



Speech Development Checklist (0-6 Months)

Instructions: Answer all questions up to your child’s current age bracket by answering ‘Yes’ on ‘No’.

Interpretation: If you check 2 or more boxes within each domain with a ‘Yes’ contact Moving Mountains Therapy Center at 406-396-4130 phone as your child may benefit from further evaluation.

Does your child have **difficulty** with:

Play and Social Skills	YES	NO
Establishing eye contact (for a few seconds).		
Laughing in response to play		
Smiling when socially approached.		
Calming/settling (cries frequently).		
Manipulating and exploring objects.		
Speech and Sound Skill	YES	NO
Making cooing sounds.		
Turning towards sounds.		
Responding with eye contact when they hear an adult talking or when making sounds.		

If you are concerned, please contact us to schedule an evaluation to assess need for speech therapy services.

Moving Mountains Therapy Center
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This checklist was designed to serve as a functional *screening* of developmental skills per age group. It does *not* constitute an assessment nor reflect strictly standardized research.