

## SLI - VOICE DISORDER CHECKLIST

**STUDENT:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**TEACHER:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_  
**PERSON COMPLETING FORM:** \_\_\_\_\_  
**RELATIONSHIP TO STUDENT:** \_\_\_\_\_

Place a check beside each characteristic of the above-named student's voice you have observed.

### VOICE BEHAVIOR

- \_\_\_\_\_ 1. Voice problems (pitch, loudness, or quality) not observed.
- \_\_\_\_\_ 2. Voice problems are observed as follows:
  - \_\_\_\_\_ Voice often sounds raspy, hoarse, or harsh.
  - \_\_\_\_\_ Voice has unusual nasal quality.
  - \_\_\_\_\_ Student loses voice (becomes aphonic) or speaks too softly to be understood easily.
  - \_\_\_\_\_ Student frequently displays vocal abuse such as yelling, throat clearing, or coughing.
  - \_\_\_\_\_ Student's voice problems have persisted over a period of time (at least 6 weeks).

### MEDICAL HISTORY

- \_\_\_\_\_ 1. Student has seen physician because of voice problems.
- \_\_\_\_\_ 2. Student is frequently absent from school for respiratory problems.
- \_\_\_\_\_ 3. Student has a known history of frequent colds, allergies, asthma, etc.
- \_\_\_\_\_ 4. Student has a history of cleft palate or other oral structural problems.

Please attach any relevant information regarding medical history.

### ACADEMIC PERFORMANCE

- \_\_\_\_\_ 1. Voice problems do not affect student's academic performance.
- \_\_\_\_\_ 2. Voice problems adversely affect academic performance in the following situations:
  - \_\_\_\_\_ Oral reading.
  - \_\_\_\_\_ Structured speaking tasks (i.e., reciting math facts).
  - \_\_\_\_\_ Other academic activities (i.e., book reports and oral presentations).

Describe how above is/are affected by voice problems: \_\_\_\_\_  
\_\_\_\_\_

### CLASSROOM PARTICIPATION

- \_\_\_\_\_ 1. Voice problems do not affect student's classroom participation.
- \_\_\_\_\_ 2. Voice problems adversely affect classroom participation in the following situations:
  - \_\_\_\_\_ Asking/answering questions.
  - \_\_\_\_\_ Other oral activities in classroom.
  - \_\_\_\_\_ Conversation with peers.
  - \_\_\_\_\_ Conversation with adults.

**SIGNATURE OF PERSON COMPLETING FORM:** \_\_\_\_\_

**PLEASE RETURN FORM TO:** \_\_\_\_\_