

MORGAN COUNTY SCHOOLS
SPEECH / LANGUAGE SCREENING RESULTS

Date: _____

Dear Parents of _____:

Your child was recently screened for speech / language services and achieved the following results:

_____ Skills are age appropriate, and no further intervention is recommended at this time.

_____ Some developmental errors were noted that are typical for your child's age. Intervention is not recommended at this time.

_____ Some Speech errors were noted, however, they do not impact your child's academic performance and intervention through the school system is not warranted at this time.

_____ Some speech and / or language concerns were noted. Informal intervention will be tried with the classroom teacher.

_____ Recommend speech and / or language testing at this time.

If informal interventions or further testing are recommended, we will be contacting you to meet with us at a future date this school year.

If you have any questions, please contact your school Speech Therapist at this number _____.

SLP signature