



K-Prep Learning Center

3943 Columbia Avenue, Columbia, PA 17512 (717) 285-2711

Ages & Stages Questionnaires: Third Edition (ASQ-3) Consent Form

Your child's development is important to us. During your child's first 45 days of enrollment and periodically throughout their time here at school, teachers and staff will use a research-based screening tool to confirm development is progressing as expected.

The Ages & Stages Questionnaires (ASQ-3) and Ages & Stages Questionnaire: Social-Emotional (ASQ:SE) can be used by both families and caregivers, to help track development. Each ASQ-3 questionnaire features 30 simply worded questions about your child. They are organized into five areas: Communication, Gross Motor, Fine Motor, Problem Solving and Personal-Social Skills. An overall section addresses any general concerns. The ASQ:SE takes the ASQ a step further by concentrating on the importance of considering social-emotional competence in young children. Both forms are designed to be answered in a short period. A simple scoring procedure is then used to help determine if there is a need for further assessment.

It is important to note that this is only a screening, designed to help parents and teachers focus on various area of your child's development.

If the questionnaire shows some possible concerns, we will provide additional activities designed for use with the ASQ-3 to encourage development. We will then re-screen your child in 4-6 months. If a concern persists, we may suggest your child receives a more individual assessment. You are always welcome to review the ASQ scores at any time, or request a screening at a non-scheduled time. Information will only be shared with other agencies with your written consent.

We appreciate your consent in filling out this screening for your child. If you have any questions specifically about the ASQ, we encourage you to visit www.agesandstages.com.

I have read the information provided about the Ages & Stages Questionnaire (ASQ-3 & ASQ-SE), and I wish to have my child participate in the screening program. I allow the staff members and administrators at K-Prep Learning Center to fill out questionnaires about my child's development.

I do not wish to participate in the screening program. I have read the provided information about the Ages & Stages Questionnaire (ASQ-3 & ASQ: SE) and understand the purpose of this program

Parent / Guardian Name _____

Parent / Guardian Signature _____ Date _____

Child's name: _____ DOB _____

If child was born 3 or more weeks prematurely, # of weeks premature: _____

Child's Primary Physician: _____