

OT Pre-Referral SAT Checklist

Student: _____ Age: _____ Date of birth: _____ Person completing form: _____

Ages 3-4		
Activity	Yes	No
Gross Motor Skills		
Hops and stands on one foot for 5 seconds		
Jumps in place with both feet		
Goes up and down stairs without support		
Kicks a ball forward		
Throws a ball overhand		
Catches a bounced ball with both hands most of the time		
Moves forward and backward		
Rides a tricycle with pedals		
Fine Motor and Visual Motor Skills		
Strings 3-4 large beads		
Builds a tower with 3-5 blocks		
Copies a simple sequence of colored blocks in the form of a tower		
Turns single pages in a book		
Makes snips with scissors		
Holds a crayon with the thumb and fingers		
Uses one hand consistently for most activities		
Scribbles spontaneously with a crayon		
Imitates circular, vertical, and horizontal strokes		
Is able to sort shapes and colors		
Eats without assistance		
Picks up small objects with the thumb and index finger		
Completes simple insert puzzles		
Grasps a crayon between the thumb and fingers		
Uses one hand consistently for most activities		
Uses the non-dominant hand to assist and stabilize objects		
Draws circles and squares		
Draws a person with 2-4 body parts		
Copies square shapes		
Copies a circle		
Traces on thick lines		
Imitates drawing a cross		
Begins to copy some capital letters		
Uses scissors with one hand		
Uses scissors to cut paper in half		
Cuts roughly around pictures		
Builds a tower out of 9 blocks		
Makes a bridge out of 3 blocks		
Copies blocks designs of up to 6 blocks		
Completes a 5-7 piece puzzle		
Threads a sequence of small beads		

Completes a 4-6 piece puzzle		
Opens zip lock bags, containers, and lunch boxes		
Self-Care Skills		
Unzips clothing		
Unsnaps clothing		
Unbuttons clothing		
Puts on shoes		
Buttons large buttons		
Pulls zipper up after it is started		
Can feed self with a spoon or fork		
Sensory Processing		
Seems overly sensitive to touch		
Will not touch certain textures (socks, certain clothes, sandy, sticky, etc.)		
Appears clumsy		
Avoids balance activities		
Spins/flicks/lunges fingers		
Eats inedible objects		
Avoids certain foods or textures		
Seems sensitive to certain odors		
Has difficulty with eye-tracking		
Pokes at eyes		
Has an excessive desire to jump, kick, bounce, throw self, and bump into objects/people		
Seems sensitive to certain sounds		
Oral Motor Skills		
Has difficulty chewing food or chokes on food easily		
Excessive drooling		
Has poor lip closure on utensils, leading to food and liquid escaping		
Other Skills		
6-20 minute attention span		
Will listen to a short story book with pictures		
Is able to identify at least one body part		
Adjusts to rules and routines quickly		
Is able to follow three-step commands		
Responds well to simple rules		
Plays make-believe		

Teacher Observation of concerns impacting classroom performance: