Child's name:	Date of birth:
Gender:	Date completed:

OZI: Australian English Developmental Vocabulary Inventory [Short Form]

Please go through the list and mark the words that your child knows.
Select Understands if your child understands the word but does not say it yet. Select Says if your child says the word spontaneously (not just when they are imitating you).

If your child uses a different or incomplete pronunciation of a word (for example,'raffe' instead of 'giraffe' or 'sketti' instead of 'spaghetti'), mark the words anyway as we are interested in the vocabulary of your child, not in his/her articulation.

Remember:

1. If your child is learning English and another language(s) at home, please choose Says or Understands if they know the word in any language.
2. Please just select words based on what you know or have noticed recently with your child.
3. If your child is young, s/he might not know many words on the list - that's expected.

Child's name:	Date of birth:
Gender:	Date completed:

Word list:

	U	S		U	S		U	S		U	S
Baa baa			Hat			Tree			Hug		
Uh oh			Necklace			Pool			Listen		
Ouch			Shoe			Flag			Like		
Kangaroo			Coat			Shop			Pretend		
Bird			Lips			House/Home			Pull		
Cat			Toes			Beach			Shake		
Bear			Leg			School			Run		
Sheep			Chin			Mummy			Think		
Spider			Tongue			Grandma/Nanna			Wish		
Penguin			Glass			Person			Look		
Airplane			Clock			Friend			Big		
Boat			Mop			Doctor			Gentle		
Game			Comb			Lunch			Careful		
Puzzle			Towel			Call			Dirty		
Present			Toothbrush			Thank you			Fine		
Pasta			Keys			Night-night			Mad		
Beans			Picture			No			Noisy		
Meat			Chair			Carry			Slow		
Peas			Bed			Chase			Happy		
Salt			Oven			Dump			Tiny		
Yoghurt			Stairs			Finish			Today		
Cereal			Bench			Fit			She/he		
Custard			Cloud			Drop			Does		
Carrots			Swing			Build			Down		
Pudding			Sun			Black			In		
Sub-total			**Sub-total**			**Sub-total**			**Sub-total**		
									TOTAL		

Combining Words into Sentences

Has your child begun to combine words yet, such as "more milk" or "doggy bite"?

Not yet		**Sometimes**		**Often**	

Child's name:	Date of birth:
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If you answered "sometimes" or "often" please list three of the longest sentences you have heard your child say recently. If you answered "not yet", please go to the additional questions.

1. _____
2. _____
3. _____

Additional Questions

					Yes	**No**
Does anyone speak to your child in a language other than English?						
If yes, which language(s)						
On average, how many hours per week would your child hear the language(s)?						
Language:			Hours per week:			
Language:			Hours per week:			
Language:			Hours per week:			
Has your child ever had any hearing problems?						
If yes, please specify						
Was you child born full term?						
If no, how many weeks premature?						
What is the child's parents'/caregivers' education level?						
Caregiver 1: *(please indicate the exact year completed, i.e., year 6)*						
How many years of primary schooling did you complete?						
How many years of high school did you complete?						
Tertiary Education *(circle)*	TAFE	University	Masters	Ph.D.	Other	
Caregiver 2: *(please indicate the exact year completed, i.e., year 6)*						
How many years of primary schooling did you complete?						
How many years of high school did you complete?						
Tertiary Education *(circle)*	TAFE	University	Masters	Ph.D.	Other	
Does your child have a diagnosed medical condition or developmental disability?						
If yes, please provide details:						

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Actions and Gestures

First communicative gestures: When infants are first learning language, they often use gestures to make their wishes known. For each item below mark the line that describes your child's actions right now.

	Not yet	Sometimes	Often
Extends arms to show you something he/she is holding.			
Reaches out and gives you a toy or some object that he/she is holding.			
Points (with arm and index finger extended) at some interesting object or event.			
Waves bye-bye on his/her own when someone leaves.			
Extends his/her arm upward to signal a wish to be picked up.			
Shakes head "no".			
Nods head "yes".			
Gestures "hush" by placing finger to lips.			
Requests something by extending arm and opening and closing hand.			
Blows kisses from a distance.			
Smacks lips in "yum yum" gesture to indicate that something tastes good.			
Shrugs to indicate "all gone" or "where'd it go".			
TOTAL:			

Games and routines: Does your child do or try to do the following?

	Yes	No
Play "peekaboo".		
Play "round and round the garden".		
Play "twinkle twinkle little star".		
Play chasing games.		
Sing.		
Dance.		
TOTAL		

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	Yes	No	Not sure
Are you concerned about the way your child understands things that you say?			
If YES, is this concern in all languages the child hears?			
Are you concerned about the way your child makes sounds or uses words?			
If YES, is this concern in all languages the child uses?			
Are you completing this checklist with a health or education professional (e.g. educator, speech pathologist, Community Family Health Nurse)?			

You have now completed the OZI-SF.

To find out what your child's scores mean, please visit the OZI-SF interactive webpage for resources and recommendations: