

ALABAMA'S EARLY INTERVENTION SYSTEM ELIGIBILITY DETERMINATION REPORT

Program:

Initial Eligibility Annual Eligibility

This report reflects this child's current strengths and the team's concerns for one or more developmental areas and is based on age-appropriate procedures conducted by qualified personnel to determine eligibility for Alabama's Early Intervention System.

Child's Name: _____ **Sex:** M or F **Parent/Caregiver:** _____

Date of Birth: _____ **Age today (months):** _____ **Corrected Age (to 18 months):** _____

Test: _____ **Location of Evaluation:** _____ **Date of Evaluation:** _____

Report of Child History: _____

Area	Results (Months)	Report <u>25%</u> <u>Delay</u>	Evaluator Observations/Clinical Opinion
Physical (movement)			Strengths: Concerns: <div style="display: flex; justify-content: space-around;"> Parent has concern Parent has no concern </div>
Cognitive (learning)			Strengths: Concerns: <div style="display: flex; justify-content: space-around;"> Parent has concern Parent has no concern </div>
Communication (language)			Strengths: Concerns: <div style="display: flex; justify-content: space-around;"> Parent has concern Parent has no concern </div>
Adaptive (self-care)			Strengths: Concerns: <div style="display: flex; justify-content: space-around;"> Parent has concern Parent has no concern </div>
Social/Emotional (relationships)			Strengths: Concerns: <div style="display: flex; justify-content: space-around;"> Parent has concern Parent has no concern </div>

Functional Vision screen results: Pass Not Pass This evaluator did not complete

Functional Hearing screen results: Pass Not Pass This evaluator did not complete

Evaluator Name/Signature/Credential: _____

