



## Toddler Developmental Profile

Year \_\_\_\_\_

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Teachers/Classroom: \_\_\_\_\_

KEY: N/A = Not applicable	Introduced/Emerging		Progressing	Consistent	
	Fall	Spring		Fall	Spring
<b>Language Development</b>			<b>Gross Motor Development</b>		
Uses single words			Usually walks in classroom		
Uses phrases			Runs with control		
Uses sentences			Climbs with ease		
Expresses needs			Hops on two feet		
Articulates			Balances on beam		
Understands directions			Catches with ease		
Responds verbally to simple questions			Uses maximum effort		
			Spins in place		
			Spatial awareness		
<b>Social/Emotional Development</b>			<b>Fine Motor Development</b>		
Separates easily			Uses pincer grasp		
Transitions Easily			Pours with control		
Initiates conversation			Scoops		
Participates at group			Spoons		
Shows empathy			Tongs		
Respects other's work/space			Squeezes sponge with control		
Aware of expectations			Opens and closes objects		
Respects expectations			Cuts with scissors		
<b>Work Habits</b>			<b>Care of Self</b>		
Works alone			Dressing/undressing		
Works with others			Hand washing		
Focus on one task			Toilet learning		
Complete tasks			<b>Musical Awareness</b>		
Respects Materials			Rhythm Instruments		
Assists in care of environment			Bell Stair		
Waits patiently					

**FALL Teacher Comments:**

Teacher Signature \_\_\_\_\_

Date: \_\_\_\_\_

Parent(s) Signature(s)

\_\_\_\_\_

Date:

\_\_\_\_\_

**SPRING Teacher Comments:**

Teacher Signature

\_\_\_\_\_

Date:

\_\_\_\_\_

Parent(s) Signature(s)

\_\_\_\_\_

Date:

\_\_\_\_\_