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Part A

1.	You find it harder to acquire and execute coordinated moreompared to others of your chronological age, taking in opportunity to learn the skills and use them?	
	Yes ☐ No ☐ Yes = 1 No = 0	
2.	Are you clumsy, when compared to other people, do you freq	uently:
	 (a). Bump into things; Yes No Yes = 1 No = 0 (b). Drop things? Yes No Yes = 1 No = 0 (c). Finding it challenging to hold utensils? Yes No Ye (d). Find that your performance in sports take part in gar coordination of limbs to be substantially below your peer Yes No Yes = 1 No = 0 (e). Do you have awkward or messy handwriting? Yes = 1 	mes that require rs?
	(f). Did you find it challenging to ride a bike? Yes No	
Insei	t Sub-total for Part A Here:	Maximum 7
If you	ur score for Part A is below 1, you probably to do not have raxia and you should not complete section B.	
Addit	ional Comments:	

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PART B

 When considering looking after yourself and maintaining you day basis; Do the skills referred to in part B impact on the tas to do to live daily, persistently when compared to other people 	sks that you need
Yes = 1 No = 0 Yes No 4. And impact on: (a). Educational performance or productivity? Yes No Yes = 1 No = 0 (b). Employment or preparing for work? Yes No Yes = 1 No = 0 (c). Leisure? Yes No Yes = 1 No = 0 (d). Pay; Yes No Yes = 1 No = 0 (e). Play; Yes No Yes = 1 No = 0 (f). Work and employment? Yes No Yes = 1 No	- /es = 1 No = 0
Insert Sub-total for Part B Here:	Maximum 7
If your score for Part A is below 1, you probably to do not have	
dyspraxia and you should not complete section B.	
Additional Comments:	



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PART C

Did the symptoms that you refer to in Parts A and B occur before the	e age of six?		
Yes		Page 3	
Insert Sub-total for Part B Here:	Maximum 1		
If your score for Part C is below 1, you probably to do not have dyspraxia and you should not complete section D.			
Additional Comments:			

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PART D

5. Are the difficulties with motor skills that have been identified in Parts A and B a result of:

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- (a). A visual impairment? Yes = 1 No = 0
- (b). A neurological problem that impacts on your movement, such as:
 - i. muscular dystrophy; Yes = 1 No = 0
 - ii. cerebral palsy; Yes = 1 No = 0
 - iii. degenerative disorder; Yes = 1 No = 0
- (c). a learning disability; Yes = 1 No = 0

Insert Sub-total for Part B Here:	Maximum 1
 If your score for Part D is below 0, you probably have dyspraxia, but this will need to be confirmed with by a full diagnostic assessment with an expert psychologist. 	
 If your score is above1, you may have dyspraxia, and another but your condition is most probably be explained by the symptoms in 5(b), and you should consult your GP or a neurologist, before approaching our expert psychologists. 	
 If your score is above one, and you might have a learning disability, or you might have dyspraxia and a learning disability, and you should ask our expert psychologist to evaluate both conditions. 	
Additional Comments:	
If you decide to book a dyspraxia diagnostic assessment, please complete the detail on page 5 and email this form to the Client Support Team when you make your booking.	

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IMPORTANT THIS SECTION MUST BE COMPLETED

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Please provide details of:
The last educational instruction you were at Your grades Your dates of attendance The level of the course
If you are currently studying or intend to study, please provide details of The Name and address of the institution you are studying at: Your grades Your dates of attendance The duration of the course and your current year The level of the course
Your home address:
SignedPrint Name:
Please state if the test was completed on behalf of a child