

February 2017



Dear Parents

Following a successful trial in 2016, Sutherland Dianella Primary School has again formed a partnership with Liana Gunzburg, Speech Pathologist, to carry out speech and language development screening on Kindergarten and Pre Primary children during Terms 1-2. Liana will also consult with the teaching staff to support them in making use of the screening data in programming for language activities.

Your child has been selected to participate in the screening, based upon the results obtained in 2016 when he/she was in Kindergarten. Each child will be seen individually, away from the classroom, after Liana has spent some time in the Pre Primary. A written summary will be provided about your child's skills with recommendation for further assessment if required.

Please complete the information below and sign the permission section so that your child can be included in this important initiative.

Yours sincerely,

Jenn Allsop
Principal

CHILD'S NAME: _____ Date of Birth: _____
Country of Birth _____
PARENTS' NAMES: Mother: _____ Father: _____
Phone (H): _____ Mobiles: _____
Address: _____
Email: _____
Please give details about any events over the past year (i.e. since the previous screening) that may be relevant to your child's language development. These might include ear infections, a hearing test, speech therapy, other assessments (psychology, OT, vision, etc), prolonged illness, extended time away from school, etc.

I _____ (parent's name) give permission for my child _____ to participate in the speech and language screening at Sutherland Dianella Primary School. I understand that the information will only be used to detect possible difficulties and plan the most appropriate program to assist my child's education, and that all information will be treated with respect and privacy.
Parent's Signature _____ Date: _____

Thank you for completing this questionnaire.
Please return it to the class teacher or the school office as soon as possible.