The handbook reviews approximately 150 educational tests and their uses within the total process of educational assessment for students who have academic difficulty because of mental retardation; learning disabilities; physical handicaps; emotional, sensory, and social disorders; other health impairments; and related problems. Introductory information covers the purposes of testing (e.g., referral, screening, eligibility determination, instructional planning); types of tests and characteristics (group versus individual, norm-referenced versus criterion-referenced, and formal versus informal); student centered vs environmental centered assessment; kinds of assessment information; areas of concern for assessment (e.g., academic or behavior problems); test reliability and validity; and protection in evaluation procedures. Tests are then described under the following categories: intelligence, speech and language, perceptual motor skills, adaptive behavior, diagnostic systems, reading, mathematics, written expression and spelling, academic achievement, personality, instruments and procedures for assessing young children, and vocational assessment and evaluation. Usually provided for each test is name, address of publisher and phone number, type of test, method of assessment, age/population test is intended for, and purpose. An index of tests is provided. Four references are provided. (DB)
A Handbook for Parents and Professionals

Special Education Assessment Tests
ASSESSMENT:
Special Education Tests
A Handbook for Parents and Professionals

E. Jean Hosterman, Editor
School Psychologist and Licensed Consulting Psychologist

Published by PACER Center, Inc.
Co-Directors: Marge Goldberg and Paula F. Goldberg
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PREFACE

Over the years at PACER we have talked to many parents who have raised questions about the tests given to assess their children with disabilities. In 1979 we developed a brief handout as a simple guide to the education tests being used at that time. Ten years later, we knew we needed an update to this original information.

One day we received a call from Jean Hosterman, a licensed consulting psychologist who had recently retired as a school psychologist. She wanted to volunteer her services in whatever way we needed. So we told her about this little project we had to revise our 11-page handout. The results — many hours and meetings later — are what you see in this expanded booklet.

Thanks to Jean, parents now have a new easy reference for tests they may hear about at school. We are grateful for her excellent work which will help to answer questions like:

- What kind of test did they give my child?
- What qualities does this test evaluate?
- What other assessments may be appropriate?

This booklet is just a starting point from which you may choose to pursue more in-depth knowledge about assessment in other publications or from the publishers listed. We welcome your comments.

Marge Goldberg
Co-Director, PACER Center

ACKNOWLEDGEMENTS

PACER and Jean Hosterman would like to express our appreciation to those who have reviewed our materials and offered critical and constructive ideas and advice.

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INTRODUCTION

Assessment is the process of gathering information about a student in order to make decisions about his or her education. One kind of assessment procedure is testing. In elementary and secondary schools, tests are given routinely to measure the extent to which we profit from instruction. We may have taken intelligence, aptitude, interest, personality tests or any number of other kinds of tests. Testing means presenting a person with a set of questions or tasks in order to obtain a measure of performance often represented by a score. The score is intended to help answer questions and produce information about the person tested.

Assessment in schools for special education purposes is a much broader process that involves far more than giving a test. When students are assessed, we are looking at how they perform different tasks in a variety of settings, what motivates them, what the meaning of their performance is in terms of their total functioning. Assessment then, is the process of collecting information. Some of the information may be from test scores; much of it will be other forms of information.

This booklet reviews educational tests and their uses within the total process of educational assessment for students who have academic difficulty because of mental retardation, learning disabilities, physical handicaps, emotional, sensory and social disorders, other health impairments, and related problems.

No attempt has been made to provide a listing of all the available tests. Rather, tests have been selected on the basis of their current use in special education programs in Minnesota. No endorsement of specific instruments is intended.

The booklet was written for the use of parents who will be meeting with child study teams where the barrage of information presented can be overwhelming and confusing. Since parents are an integral and important part of the child study team process, PACER Center has developed this booklet so that they will be better informed about the myriad of tests and procedures used in special education today.

PURPOSES OF TESTING

The general purpose of testing in schools is to find answers to some relevant questions about the student. Some of these questions may be:

- how well can the student function in the basic skills of reading, writing, spelling, math or in the skills of daily living and vocational endeavors?
- what are his or her strengths and weaknesses in these areas?
- what and how can the student be effectively taught?
- what progress is being made?

Group achievement tests given in the classroom from year to year furnish important information about a student's progress in relation to other students of the same age or grade level. But in order to determine a single student's pattern of strengths and weaknesses, individual testing is needed. Tests for students having difficulties in school have five main functions:

1. **Referral**
   Typically teachers and sometimes parents refer students for individual assessment based on results of group tests and concern about poor progress in school work.

2. **Screening**
   To identify students in a group who need further assessment, a screening test or series of short tests might be given to a group of students who have something in common - age, grade level, or signs of a special problem such as poor reading or math skills. A good screening test identifies the students intended. Those falsely identified by the test as having problems (called "false positives") can be properly identified in further assessment. On the other hand, students with difficulties who slip through unidentified (called "false negatives") may be missed in the further assessment process. A good screening test aims to have as few false negatives and false positives as possible.
3. Eligibility
In schools today, assessment for the purpose of eligibility usually concerns a student's eligibility for special education. Data is gathered from testing, from observation in the classroom, and from interviews with staff and parents to verify the extent of the handicap and to clarify the types of services and program placement needed.

4. Instructional Planning
Planning an instructional program is based on the individual assessment of critical areas requiring special help. Specialists from various areas (classroom, speech, learning disabilities, psychology, occupational therapy etc.) meet with parents to report results of assessment and then work together to develop an Individual Educational Plan (IEP). The IEP describes strengths and weaknesses, instructional goals and objectives, plan of action, staff involved, curriculum areas and methods for evaluating and reporting progress to parents.

5. Monitoring Student Progress and Program Evaluation
The final function of educational assessment is to verify that a student has made progress. Various kinds of assessment devices can be used along the way to fine tune the instruction; in addition, the summary assessment evaluates goal achievement.

Still another type of program evaluation is administrative. Data is collected to measure progress of groups of students for the purpose of evaluating the program as a whole and to make changes where they are indicated in the district assessment program.

TYPES OF TESTS AND CHARACTERISTICS

This section some characteristics of the many types of tests available today are described.

Group vs Individual
Although group tests can be administered to one person or to several persons together, individual tests should be given to only one person at a time.

Individual tests have several advantages over group tests when the purpose is to look closely at a student's skills. First, the person's responses can be observed; second, the tester can alter the tempo and pace of testing, rephrase or clarify questions, and encourage answers to be explained further when the student appears to know the answer but is hesitant in responding.

Norm-referenced vs Criterion-referenced Tests
Norm-referenced tests have standardized, formal procedures for administering, timing and scoring. They have been "normed" or administered to a representative sample of similar age or grade level students so that final test results can be compared to students of similar characteristics. Test results indicate a person's relative performance in the group. These standardized tests must be administered as specified in the manual to ensure valid and reliable results.

Criterion-referenced tests (CRT) measure what the person is able to do and indicate what skills have been mastered. CRT compare a person's performance with his or her own past performance. An example is the number of spelling words correct. If Molly spells 15 of 20 words correct, that is 75% correct, higher than the past week when her score was 60% correct. In criterion-referenced measurement, the emphasis is on assessing specific and relevant behaviors that have been mastered rather than indicating the relative standing in the group.
Increasingly, educators are finding new ways to evaluate students' school performances using informal rather than formal, or standardized, assessment procedures. Collection of information by means of observation is often thought of as informal assessment, as is information gathered from interviews with parents or past teachers and by using teacher-constructed tests.

Over the past few years, some districts have increased the use of curriculum-based measurements (CBM). Several samples of a student's performance are collected, using items drawn from the local curriculum, usually in basic skill subjects of reading, math, spelling and written expression. Such brief tests are called "probes." Student performances are measured by a frequency count of, for example, words read, written or sequenced correctly, or math problems answered correctly. The norms used to compare a student's performance have been previously determined by testing random groups of students at each grade level. CBM has been used as part of the overall assessment program for purposes of screening, program placement, instructional planning and monitoring student progress. Curriculum-based measurement provides the teacher with a relatively fast and frequent method to measure student progress in the regular school subjects. Both group and individual administration are used, depending on the school subject being tested.

STUDENT CENTERED VS ENVIRONMENTAL CENTERED ASSESSMENT

Occasionally the type and degree of handicapping condition requires using the student's environment as the primary informational source for the assessment. An example of this is when a student has severe retardation or physical disabilities and is unable to perform on typical test instruments. Assessment in this situation requires observing the student in his/her environment over time to gather information about various competencies that the student possesses. Additional information is gathered by questioning significant people in the student's environment, i.e., parents and teachers. Adaptive behavior scales (e.g., Vineland Adaptive Behavior Scales) are used to organize and score information gathered in this manner. The section "Assessment of Adaptive Behavior" in this booklet describes some commonly used procedures.

KINDS OF ASSESSMENT INFORMATION

Although the booklet is concerned primarily with describing tests, it is important to remember that tests are only one of the assessment procedures used in the process of gathering information. The various techniques used are listed below. Each one can focus on how the child performs now or in the past.

- Observations:
  Examples include: (a) counting the number of times a problem behavior occurs in a certain time period, (b) descriptions of work habits observed and (c) reviewing descriptive records from the past.

- Tests:
  Tests used in schools come from a variety of sources, including past and current school records and information from other agencies. New tests and revisions of older tests are coming into use regularly.

- Judgments:
  Rating scales recently completed by teacher or parents along with past report cards and interviews with parents about the child's early development are based on judgments of significant people in the student's life.

The child study team responsible for the assessment collects all of the current and historical information available to determine the student's strengths and weaknesses and educational needs for discussion with the parents at the meeting to formulate the instructional plan. Parents are important participants in the child study team's work.
### AREAS OF CONCERN FOR ASSESSMENT

**Academic Problems**

A referral for special education assessment is typically made when teachers and/or parents believe that the student is not achieving as well as expected in class.

Testing of academic skills is almost always included in making instructional decisions.

**Behavior Problems**

Failure to get along with peers, disrupting class activities, excessive withdrawal and other non-compliant behaviors are some of the problems referred for psychological and educational assessment. Before a full-scale assessment is made, efforts are made to make changes in the regular classroom and discuss the problem with the parents to work out a first step plan. Further assessment by the special education team may be requested when these initial attempts do not succeed.

**Physical Problems**

Physical problems include many types and severities of sensory (vision and hearing), physical disabilities and health impairments. The school nurse performs routine hearing and vision screening in schools, takes referrals from teachers regarding health problems noted in class, notifies parents of physical conditions that need further attention and acts as liaison with parents, medical personnel and school staff in attending to the physical needs of students. The school nurse is a key player on the child study team.

### TEST RELIABILITY AND VALIDITY

In order to ensure each child a fair assessment, it is essential that the instruments used to test are both valid and reliable.

**Validity** is the primary consideration. Does the test measure the skill area well? Is the format of the test appropriate to the purpose of the assessment? These are questions to be asked in determining the validity of a test. For example, a test is given to determine reading comprehension but tests only word recognition skills, it is not a valid measure of comprehension. (It may be a perfectly valid test of word recognition, however.) There are a number of types of validity that are described in the manual from the publisher accompanying the test. It is beyond our purpose here to go into the technical details of test standardization, but information on validity is essential for selecting tests to use.

**Reliability** is second only to validity in importance as a criterion for selecting a test. The consistency with which a test measures what it measures refers to its reliability. If a test is reliable, we can be confident that the results can be used to generalize from the test situation to other situations. For example, if, due to factors in the test itself, we cannot generalize student's reading skills observed during testing to the classroom situation, then the results are of little or no value to the teacher.

Some of the factors that might influence a student's score on a test are within the student—attention, motivation, physical condition, anxiety and so forth. The good diagnostician takes these factors into account when interpreting test scores. But other factors affecting reliability are part of the test itself—the length of the test, the clarity of instructions, the objectivity of scoring, and others.

The diagnostician selecting a test must learn to study the validity and reliability data in the test manual and select tests that best yield the needed educational information.
PROTECTION IN EVALUATION PROCEDURES

In 1975 the Education For All Handicapped Children’s Act (PL 94-142) was passed by Congress and signed into law, mandating special education for eligible persons. In 1986 a major set of amendments to that act was passed—Public Law 99-457—expanding the provisions to include preschool age children with handicaps. Among the many provisions of these acts are the following eight requirements designed to protect children and to help ensure that assessments are fair, equitable and non-discriminatory.

1. Tests are to be selected and administered in such a way as to be racially and culturally nondiscriminatory.

2. To the extent feasible, students are to be assessed in their native language or primary mode of communication.

3. Tests must have been validated for the specific purpose for which they are used.

4. Tests must be administered by trained personnel in conformance with the instructions provided by the test producer.

5. Tests used with students must include those designed to provide information about specific educational needs, and not just a general intelligence test score.

6. Decisions about students are to be based on more than a performance on a single test.

7. Evaluations are to be made by a multidisciplinary team that includes at least one teacher or other specialist with knowledge in the area of suspected disability.

8. Children must be assessed in all areas related to a specific disability, including—where appropriate—health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative skills, and motor skills.

In addition, PL 94-142 specifies that each child with handicaps must have an individual education plan (IEP) that 1) is based on the comprehensive assessment by a multidisciplinary team, 2) specifies long and short term instructional goals with plans for implementing them and 3) describes how progress will be evaluated.

More detailed information about these laws and their regulations is available from your local special education director, the Department of Education, Unique Learner Needs Section, (612) 296-4163, or from PACER Center in Minneapolis (612) 827-2966.
### ASSESSMENT OF INTELLIGENCE

<table>
<thead>
<tr>
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<th>INDIV/ GROUP</th>
<th>AGE/ GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
</table>
| Arthur Adaptation of the Leiter International Performance (AALIPS) 1991 CH Stoeling Chicago, IL | INDIV. | years 2-12 | - Matching colors and forms  
- Completion of patterns  
- Analogous designs  
- Classification of objects | Assesses nonverbal intellectual functioning of children who experience difficulty responding verbally |
| Blind Learning Aptitude Test (BLAT) 1969 Newland, T. E. Champaign, IL | INDIV. | years 6-12 | - Discrimination  
- Generalization  
- Sequencing  
- Analogies  
- Pattern completion | Assesses the learning aptitude of young blind children |
| Cognitive Abilities Test (CogAT) 1986 The Riverside Publishing Co Chicago, IL 60631 | GROUP | grade levels kgd gr-1, 2-3, 3-12 | 3 Batteries;  
- verbal  
- quantitative  
- nonverbal | Provides a further development of the Lorge Thordyke Intelligence Tests which previously were used for group testing in schools |
| Detroit Tests of Learning Aptitude-2 (DTLA-2) 1985 Hammill, D. D. Pro-Ed, Austin, TX | INDIV. | years 6 to 17 & 11 mo. | Same as DTLA 2 above | Measures learning aptitude, defined as capability; ability; innate or acquired capacity; talent; readiness in learning; intelligence |
| Detroit Tests of Learning Aptitude-Primary (DTLA-P) 1986 | INDIV. | years 3-9 | Same as DTLA 2 above | A downward extension of DTLA-2 above |
| Goodenough - Harris Drawing Test (G-H) 1963 Harris, D. Children's Drawings as Measures of Intellectual Maturity Herzocut Brace Jovanovich. Orlando, FL | INDIV. or GROUP | years 3-15 | Concept and intellectual development on the basis of paper-pencil drawings of men, women and selves (described in Diagnostic Systems p. 15) | Designed to measure "intellectual maturity" defined as ability to perceive, to abstract and to generalize |
| Kaufman Assessment Battery for Children (K-ABC) 1983 American Guidance Service Circle Pines, MN 55014 | | | | Evaluate general intellectual level of young children as well as strengths and weaknesses in several ability areas |
| McCarthy Scales of Children's Abilities (MSCA) 1972 The Psychological Corp. San Antonio, TX | INDIV. | years 2 1/2-8 1/2 | - Verbal  
- Perceptual-performance  
- Quantitative  
- Memory  
- Motor  
- General cognitive | |
## ASSESSMENT OF INTELLIGENCE

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<th>AGE/GRADE</th>
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<tr>
<td>The Nebraska Test of Learning Aptitude (NTLA) 1966</td>
<td>INDIV.</td>
<td>years 3-16</td>
<td>Ages 3-10: - bead patterns - memory for color - picture identification - picture association - paper folding</td>
<td>Designed to assess the learning aptitude of deaf, hearing impaired and hearing persons</td>
</tr>
<tr>
<td>Marshall S. Hickey.  Lincoln, NE</td>
<td></td>
<td></td>
<td>Ail Ages: - visual attention span - block patterns - completion of drawings - memory for digits</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Ages 11 and above: - puzzle blocks - picture analogies - spatial reasoning</td>
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<tr>
<td>Pictorial Test of Intelligence (PTI) French 1964</td>
<td>INDIV.</td>
<td>years 3-8</td>
<td>- Verbal comprehension - Form discrimination - Information and comprehension - Similarities - Size and number - Immediate recall</td>
<td>Assesses general intellectual level of normal and handicapped children</td>
</tr>
<tr>
<td>The Riverside Publishing Co 8 71 Brymnwtr Ave.  C. ago, IL 60631</td>
<td></td>
<td></td>
<td>Includes many items that appear in the 1972 Stanford Binet-LM Intelligence Test</td>
<td>Provides a relatively short screening test to estimate intelligence</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Verbal reasoning, quantitative reasoning, abstract/visual reasoning and short term memory</td>
<td>Measures general intelligence</td>
</tr>
<tr>
<td>Slosson Intelligence Test (SIT) 1971, 1981 norms</td>
<td>INDIV.</td>
<td>27 months to 17 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slosson Educational Publications, Inc. P. O. Box 280 E. Aurora, NY 14052</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Riverside Publishing Co 8420 Brymnwtr Ave. Chicago, IL 60631</td>
<td></td>
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<tr>
<td>The Wechsler Scales</td>
<td>INDIV.</td>
<td>years 4 1/2 to 6</td>
<td>Verbal subtests: Information, Comprehension, Similarities, Arithmetic, Vocabulary, Digit span (Sentences, WPPSI only).</td>
<td>Measures specific and general mental abilities and processes using similar formats for 3 age groupings.</td>
</tr>
<tr>
<td></td>
<td>INDIV.</td>
<td>years 6-16</td>
<td>Performance subtests: Picture completion, Picture arrangement, Block design, Object assembly, Coding, Mazes. (Geometric design, WPPSI only)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>INDIV.</td>
<td>years 16 &amp; older</td>
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## Assessment of Speech and Language

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<th>Test Name</th>
<th>Author/Publisher</th>
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<th>INDIV.</th>
<th>ACE/GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
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</thead>
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<tr>
<td>Auditory Discrimination Test (Weisman Revised)</td>
<td>Language Research Associates</td>
<td>INDIV.</td>
<td>years 5-8</td>
<td></td>
<td>Discriminate likeness/difference in pairs of like sounding words</td>
<td>Measures auditory (hearing) discrimination abilities</td>
</tr>
<tr>
<td>Boehm Test of Basic Concepts - Revised (BTBC-R)</td>
<td>The Psychological Corp.</td>
<td>GROUP</td>
<td>grades K 2</td>
<td></td>
<td>Comprehension of concepts of:</td>
<td>Assesses knowledge of concepts basic to early academic learning</td>
</tr>
<tr>
<td>Carrow Elicited Language Inventory (CELI)</td>
<td>Learning Concepts</td>
<td>INDIV.</td>
<td>years 3 to 7&amp;11 mo.</td>
<td></td>
<td>Usage of grammatical forms and sentence elements</td>
<td>Gives information about the child's expressive grammatical competence</td>
</tr>
<tr>
<td>Clinical Evaluation of Language Functions (CELF)</td>
<td>Charles E. Merrill Pub. Co</td>
<td>INDIV.</td>
<td>grades K-12</td>
<td></td>
<td>• Processing subtests</td>
<td>Identifies nature and degree of language disabilities in several language areas</td>
</tr>
<tr>
<td>Expressive One - Word Picture Vocabulary Test (EOWPVT)</td>
<td>Academic Therapy Pub.</td>
<td>INDIV.</td>
<td>years 2 to 11&amp;11 mo.</td>
<td></td>
<td>Expressive vocabulary using verbal identification of pictures</td>
<td>Measures quantity and quality of a child's vocabulary</td>
</tr>
<tr>
<td>Goldman - Fristoe Test of Articulation (GFTA)</td>
<td>American Guidance Service</td>
<td>INDIV.</td>
<td>years 4 adult</td>
<td></td>
<td>Articulation of consonant sounds</td>
<td>Assesses child's ability to produce the sounds of speech</td>
</tr>
<tr>
<td>Language Sample Analysis</td>
<td>Developed by User</td>
<td>INDIV.</td>
<td>all ages</td>
<td></td>
<td>1 area of language usage</td>
<td>Measures ability to use language appropriately for age</td>
</tr>
<tr>
<td>Peabody Picture Vocabulary Test - Revised (PPVT - R)</td>
<td>American Guidance Service</td>
<td>INDIV.</td>
<td>years 2 1/2-40</td>
<td></td>
<td>Picture recognition: single word vocabulary</td>
<td>Measures non-verbal receptive (hearing) vocabulary in English</td>
</tr>
<tr>
<td>Phonological Process Analysis (PPA)</td>
<td>Weiner, P.</td>
<td>INDIV.</td>
<td>years 5-8</td>
<td></td>
<td>Speech production</td>
<td>Assesses child's use of rules for forming speech sounds</td>
</tr>
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</table>

*Note: The text is extracted from a table format*
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<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
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<th>AGE/ GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Templin - Darley Tests of Articulation 1969</td>
<td>INDIV.</td>
<td>norms through age 8 only - older subjects use 8 year norms</td>
<td>Articulation</td>
<td>Diagnostic (141 items) and screening (first 50 items) test to assess accuracy of articulation production and consistency of speech sounds</td>
</tr>
<tr>
<td>Bureau of Educational Research</td>
<td></td>
<td></td>
<td></td>
<td>Identifies strengths and weaknesses in receptive and expressive language</td>
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<tr>
<td>University of Iowa</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iowa City, IA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Test of Adolescent Language-2 (TOAL - 2) 1987</td>
<td>INDIV.</td>
<td>years 12-18</td>
<td>Vocabulary and grammar in: listening, speaking, writing, reading</td>
<td>Assesses receptive and expressive language of vocabulary and structure in English and Spanish - speaking subjects</td>
</tr>
<tr>
<td>Hammill, D., Brown L., Larsen, S., Wiederholt, L.</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Pro-Ed</td>
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</tr>
<tr>
<td>Austin, TX</td>
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<tr>
<td>Test of Auditory Comprehension of Language - Revised (TACL - R) 1985</td>
<td>INDIV.</td>
<td>years 3 to 9&amp;11 mo.</td>
<td>• Literal meaning of words • Grammar • Meaning from sentences</td>
<td>Intended to determine a child's strengths and weaknesses in both expressive and receptive language</td>
</tr>
<tr>
<td>Carrow - Wolfolk</td>
<td></td>
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<td>Developmental Learning Materials</td>
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<td>Allen, TX</td>
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<tr>
<td>Test of Language Development</td>
<td>INDIV.</td>
<td>years 4 to 8&amp;11 mo.</td>
<td>• Picture vocabulary • Oral vocabulary • Grammatic understanding • Sentence limitation • Grammatic completion • Word discrimination • Word articulation</td>
<td>Measures ability to carry out spoken commands of increasing complexity</td>
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<tr>
<td>Hammill, D. and Newcomer, P.</td>
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<td>Pro-Ed</td>
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<tr>
<td>Austin, TX</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Primary (TOLD P) 1982</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• Intermediate (TOLD I) 1982</td>
<td>INDIV.</td>
<td>years 8&amp;6 mo. to 12&amp;11 mo.</td>
<td>• Sentence combining • Characteristics • Word ordering • Generals • Grammatic comprehension</td>
<td>Tests expression, vocabulary and semantics - Measures categorizing, defining, verbal reasoning and choosing appropriate words</td>
</tr>
<tr>
<td>The Token Test for Children 1978</td>
<td>INDIV.</td>
<td>years 3-12</td>
<td>Receptive language</td>
<td>Treats expression, vocabulary and semantics - Measures categorizing, defining, verbal reasoning and choosing appropriate words</td>
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<tr>
<td>Teaching Resources Corp</td>
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<tr>
<td>100 Boyleson St.</td>
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<tr>
<td>Boston, MA 02116</td>
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<tr>
<td>The Word Test 1981</td>
<td>INDIV.</td>
<td>years 7 to 11&amp;11 mo.</td>
<td>• Word associations • Synonyms • Semantic absurdities • Antonyms • Definitions • Multiple definitions</td>
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<tr>
<td>Lingui Systems</td>
<td></td>
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<tr>
<td>1630 5th Ave. # 806</td>
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<tr>
<td>Moline, IL 61265</td>
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### ASSESSMENT OF PERCEPTUAL MOTOR SKILLS

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>INDIV/ GROUP</th>
<th>AGE/ GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bender Visual Motor Gestalt Test (BVMGT) 1938 Koppitz Scoring System-1963</td>
<td>INDIV.</td>
<td>years 5-11</td>
<td>skill in copying geometric designs on paper</td>
<td>Assesses a limited sample of perceptual motor skills: copying designs</td>
</tr>
<tr>
<td>Grune E. Stratton New York, NY</td>
<td></td>
<td></td>
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<tr>
<td>Bruninks-Oseretsky Test of Motor Proficiency 1978 American Guidance Service Circle Pines, MN 55014</td>
<td>INDIV.</td>
<td>years 4 1/2-14 1/2</td>
<td>Motor proficiency in gross and fine motor skills</td>
<td>Assesses serious motor dysfunctions and developmental delays</td>
</tr>
<tr>
<td>Beery, K. E. Modern Curriculum Press Cleveland, OH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Developmental Test of Visual Motor Integration (VMI) 1982 Beery, K. E. Modern Curriculum Press Cleveland, OH</td>
<td>INDIV. OR GROUP</td>
<td>years 2-15</td>
<td>Skill in copying geometric designs of increasing complexity</td>
<td>Assesses visual motor functions</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• spatial relationships • discrimination • figure ground • closure • memory</td>
<td></td>
</tr>
<tr>
<td>Sensory Integration and Praxis Tests (SIPT) (Revision of Southern California Sensory Integration Tests, 1972) A. Jean Ayres, Ph.D. Western Psychological Services Los Angeles, CA</td>
<td>INDIV.</td>
<td>years 4-8</td>
<td>Perception:</td>
<td>Assesses integration of the sensory motor functions</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• visual • tactile • kinesthetic</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Motor performance</td>
<td></td>
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<tr>
<td>Test of Visual-Motor Skills (TVMS) 1986 Children's Hospital of San Francisco P.O. Box 3805, San Francisco, CA 94119</td>
<td>INDIV.</td>
<td>years 2-13</td>
<td>Skill in copying forms or designs</td>
<td>Measures how well the child copies on paper what she visually perceives</td>
</tr>
<tr>
<td>Test of Visual-Perceptual Skills (non-motor) (TVPS) 1988 Health Publishing Co Children's Hospital San Francisco, CA 94119</td>
<td>INDIV.</td>
<td>years 4-12</td>
<td>Visual:</td>
<td>Determines child's visual-perceptual strengths and weaknesses that do not require a motor response</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• discrimination • memory • spatial relationships • form constancy • sequential memory • figure-ground • closure</td>
<td></td>
</tr>
<tr>
<td>NAME - AUTHOR - PUBLISHER</td>
<td>INDIV/ GROUP</td>
<td>AGE/ GRADE</td>
<td>AREAS</td>
<td>PURPOSE</td>
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</tbody>
</table>
| Adaptive Behavior Inventory (ABI) 1986 | INDIV. (third person interview) | years 6 to 18 & 11 mo. | Skills:  
- self-care  
- communication  
- social  
- academic  
- occupational | Provides information about general adaptive behavior; compares strengths and weaknesses in the individuals functioning in every day living situations |
| American Association on Mental Deficiency:  
Nihira, K., Foster, R., Shellhaas, M., & Leland, H.  
American Association on Mental Deficiency  
Washington, DC. | INDIV. (third person interview) | years 1-69 in 11 age groups | Part 1:  
- Independent function  
- Physical development  
- Economic activity  
- Language development  
- Numbers and time  
- Domestic activity  
- Vocational activity  
- Self direction  
- Responsibility  
- Socialization | Provides information about the way the person maintains personal independence and meets social situations |
| AAMD Adaptive Behavior Scale for Children and Adults (AAMD-ABS) 1975 | INDIV. (third person interview) | school ages | Includes domains in AAMD-ABS (above) with 3 behavior deletions | Provides information about personal independence and social skills and reveals areas of functioning where special program planning is indicated |
| AAMD Adaptive Behavior Scale, School Edition (ABS-SE) 1981 (adaptation of AAMD-ABS scale above for use in schools) | INDIV. (third person interview) | birth-21 | Self-help, Home living, Independent living, Social skills, Sensory & motor skills, Language and academic skills | From the 120 item checklist to determine degree to which individual is independent and socially responsible |
| Normative Adaptive Behavior Checklist (NABC)  
Adams 1984  
Charles S. Merrill Pub. Co  
Columbus, OH 43216 | INDIV. (third person interview) | infancy-adult | Gross and Fine Motor Skills  
- Social Interaction and Communication Skills  
- Personal Interaction Skills  
- Community Living Skills  
- Behavior | Identifies individuals who lack adaptive functional independence |
## ASSESSMENT OF ADAPTIVE BEHAVIOR

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>INDIV/ GROUP</th>
<th>AGE/ GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vineland Adaptive Behavior Scale (VABS) 1984,85</td>
<td>INDIV. (third person interview)</td>
<td>infant years to 18&amp;11 mo.</td>
<td>Communication, Daily living, Socialization, Motor skills, Maladaptive behavior (optional)</td>
<td>Assesses social competence</td>
</tr>
<tr>
<td>NAME - AUTHOR - PUBLISHER</td>
<td>INDIV/ GROUP</td>
<td>AGE/ GRADE</td>
<td>AREAS</td>
<td>PURPOSE</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------</td>
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<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Curriculum Based Measurement (CBM)</td>
<td>INDIV. &amp; GROUP</td>
<td>any grade; varies with curriculum used and purpose</td>
<td>Depends on subject ages: Potential areas in Kindergarten: • Letter identification, sounding and writing • Number identification, writing and grouping into sets Potential areas in gr. 1-12: • Reading rate and comprehension • Mathematics computation • Spelling • Written expression</td>
<td>CBM can be used in four different ways in making special education decisions: 1) screening 2) determination of eligibility for service(s) along with other data 3) instructional planning 4) monitoring student progress. Currently used most extensively in #3 &amp; 4</td>
</tr>
<tr>
<td>Kaufman Assessment Battery for Children (K-ABC) 1983</td>
<td>INDIV.</td>
<td>years 2 &amp; 5 mo. to 12 &amp; 5 mo.</td>
<td>• Intelligence • Achievement</td>
<td>Assesses learning potential, preferred learning style and academic achievement</td>
</tr>
<tr>
<td>System of Multicultural Pluralistic Assessment (SOMPA) 1979</td>
<td>INDIV.</td>
<td>years 5 - 11</td>
<td>Medical Model • medical conditions</td>
<td>Intend to provide a comprehensive, non-discriminatory assessment of students</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Social System Model • adaptive behavior</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pluralistic Model • learning potential or intelligence</td>
<td></td>
</tr>
<tr>
<td>Woodcock Johnson Psycho-Educational Battery Revised 1989 (WJ-R)</td>
<td>INDIV.</td>
<td>years 2 - Adult</td>
<td>Cognitive factors Achievement Areas • reading • mathematics • written language • knowledge</td>
<td>Provides a comprehensive battery of standardized tests measuring cognitive abilities and achievement</td>
</tr>
<tr>
<td>NAME - AUTHOR - PUBLISHER</td>
<td>INDIV/ GROUP</td>
<td>AGE/ GRADE</td>
<td>AREAS</td>
<td>PURPOSE</td>
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<tr>
<td>--------------------------</td>
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</tr>
</tbody>
</table>
| Diagnostic Reading Scales (Spache) 1981 | INDIV. | grades 1-7 | * Word attack  
* Word analysis  
* Sight vocabulary  
* Comprehension, oral and silent reading  
* Listening comprehension | Evaluation of oral and silent reading skills and auditory comprehension |
| Durrell Analysis of Reading Difficulties (DARD) 1980 | INDIV. | grades K-6 | * Oral and silent reading  
* Listening comprehension  
* Word recognition and analysis  
* Visual memory of words  
* Spelling  
* Listening vocabulary  
* Pronunciation of word elements  
* Prereading phonics | Estimates level of reading achievement and identifies strengths and weaknesses in reading |
| Gates-McKillop-Horowitz Reading Diagnostic Test 1981 | INDIV. | grades 1-6 | * Oral reading  
* Sight vocabulary  
* Word attack skills  
* Recognizing visual form of sounds  
* Auditory blending and discrimination  
* Spelling and written expression | Assesses skill development in reading |
| Gilmore Oral Reading Test 1968 | INDIV. | grades 1-8 | * Accuracy  
* Comprehension  
* Reading rate | Assesses skill development in oral reading |
| Gray Oral Reading Test Revised (GORT) 1986 | INDIV. | years 7 to 7&11 mo. | * Accuracy  
* Comprehension  
* Reading rate | Assesses skill development in oral reading |
| Stanford Diagnostic Reading Test (SDRT) (3rd Ed) 1985 | GROUP | grades 1-college | * Decoding Skills  
* Vocabulary  
* Comprehension  
* Reading rate | Identifies specific strengths and weaknesses in reading |
| Woodcock Reading Mastery Tests-Revised (WRMT - R) 1987 | INDIV. | years 5-75 | * Visual-Auditory learning  
* Letter and word identification  
* Word attack  
* Word and passage comprehension | Assesses readiness, basic reading and reading comprehension skills |
# Diagnostic Assessment of Mathematics

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>INDIV/ GROUP</th>
<th>AGE/ GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
</table>
- Computational processes  
- Applications | Measures understanding and application of important mathematics concepts and skills  
- Used to:  
  - determine instructional level  
  - diagnose strengths and weaknesses  
  - prescribe instruction  
  - monitor progress |
| Diagnostic Mathematics Inventory/Mathematics Systems (DMI/MS) 1983 Gessel, J. K. CTR/McGraw-Hill Monterey, CA | INDIV. | grades K-8 | - Whole numbers  
- Fractions and decimals  
- Measurement and geometry  
- Problem solving | Serves as diagnostic test and as a test for program evaluation |
| Stanford Diagnostic Mathematics Test (SDMT) (3rd edition) 1985 Beatty, L. S., Gardner, E. G., Madden, R., & Karlsen, B. The Psychological Corp. San Antonio, TX | GROUP | grades 2-12 | - Understanding numbers and processes  
- Knowledge of basic math facts and solving simple number problems  
- Application of basic math facts and principles including reading graphs and tables |  |
| Test of Mathematical Abilities (TOMA) 1984 Brown, V., & McEntire, E. Pro-Ed Austin, TX | GROUP | grades 3-12 | - Attitude toward math  
- Skills in computation and solving word problems  
- Math vocabulary  
- Application of information | To identify:  
- math level  
- strengths and weaknesses  
- document progress |
### ASSESSMENT OF WRITTEN EXPRESSION & SPELLING

<table>
<thead>
<tr>
<th>NAME - AUTHOR - PUBLISHER</th>
<th>INDIV/GROUP</th>
<th>AGE/GRADE</th>
<th>AREAS</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slingerland Screening Tests for Identifying Children with Specific Language Disability 1970 Educators Publishing Service Cambridge, MA</td>
<td>INDIV.</td>
<td>4 Levels: end of grade 1 to grade 6</td>
<td>Assesses visual, auditory and kinesthetic abilities</td>
<td>Intended to identify children with language disabilities</td>
</tr>
<tr>
<td>Test of Written Language (TOWL) 1983 Hammill, D. &amp; Larsen, S. Pro-Ed Austin, TX</td>
<td>INDIV. OR GROUP</td>
<td>years 7 to 18 &amp; 11 mo.</td>
<td>Assesses skills in areas listed</td>
<td></td>
</tr>
<tr>
<td>Test of Written Spelling, 2 (TWS-2) 1986 Larsen, S. &amp; Hammill, D. Pro-Ed Austin, TX</td>
<td>INDIV.</td>
<td>6 1/2 to 18 &amp; 5 mo.</td>
<td>Tests with spelling words that are predictable; unpredictable</td>
<td>Assesses spelling ability</td>
</tr>
</tbody>
</table>
# TESTS OF ACADEMIC ACHIEVEMENT

## Basic Skills Assessment Program Achievement Tests
- **Brigance Diagnostic Inventories of Basic Skills - 1978**
  - Curriculum Associates
  - North Billerica, MA
  - Diagnostic Inventory of Early Development (tests early developmental skills)
    - Less than developmental age of 7
  - Diagnostic Inventory of Basic Skills
    - K-6
  - Diagnostic Inventory of Essential Skills
    - 7-12

## California Achievement Tests (CAT)-1985
- **CTB/McGraw - Hill**
  - Monterey, CA
  - K-12

## Gates-MacGinitie Reading Tests-1978
- **The Riverside Publishing Co.**
  - Chicago, IL
  - K-12

## Iowa Tests of Basic Skills
- **Heironymus, A.N., Hoover, H.D., Lindquist, F.**
  - The Riverside Publishing Co.
  - Chicago, IL
  - K-9

## Kaufman Test of Educational Achievement (KTEA)-1985
- **American Guidance Service**
  - Circle Pines, MN 55014
  - 1-12
## TESTS OF ACADEMIC ACHIEVEMENT

<table>
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<tr>
<th>Grades</th>
<th>Individual Group</th>
<th>Reading</th>
<th>Math</th>
<th>Writing</th>
<th>Language</th>
<th>Spelling</th>
<th>Science</th>
<th>Social Studies</th>
<th>Skills</th>
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<td>Sound, Letter, Listening</td>
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<td>Listening Comprehension</td>
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</tbody>
</table>

- **Peabody Individual Achievement Test - Revised (PIAT-R) - 1989**
  American Guidance Service
  Circle Pines, MN 55014

- **SRA Achievement Series - 1978**
  Science Research Associates
  Chicago, IL

- **Stanford Achievement Test Series**
  The Psychological Corp.
  Cleveland, OH
  - Stanford Early School Achievement Test (SESAT) - 1983
  - Stanford Achievement Test (SAT) - 1982
  - Test of Academic Skills (TASK) - 1983
  - Special Editions for Vision and Hearing Impaired

- **Tests of Achievement and Proficiency (TAP) - 1986**
  Scannell, D.P.
  The Riverside Publishing Co.
  Chicago, IL

- **Wide Range Achievement Test - Revised (WRAT-R) - 1984**
  Jastak Assessment Systems
  Wilmington, DE
The assessment of social-emotional development, behavior and personality in the school setting focuses not on mastery of skills but on the interpretation of behaviors that are disturbing to persons who come into contact with the student. The most commonly used techniques in evaluating behavior are:

- **Rating scales and check lists filled out by a parent, teacher or someone else close to the child.** Scales typically include behaviors, both desirable and undesirable, that are being exhibited at home and/or school. Some forms also ask for ratings of frequency, duration and intensity of the actions.

- **Self-report measures**
  The individual being assessed is asked to report on problems and behaviors s/he is currently experiencing and inner feelings about them.

- **Situational measures**
  Life situations are presented with questions for the subject to answer or for "significant others" in the subject's life to answer about how he or she handles the situations and gets along with others.

- **Observational procedures**
  Systematic, direct observations and recording of specific behaviors provide evidence of frequency and duration of behaviors in the natural environment that are under study.

- **Projective techniques**
  The individual is shown a series of ambiguous pictures or designs such as inkblots and asked to describe what is seen.

The measures listed in this section are only a few of the numerous ones available for use in schools and clinics.
ASSESSMENT OF PERSONALITY

Cassel's Child Behavior Rating Scale (CBRS) (Cassel)
Canner's Teacher Rating Scale - Revised (Canner)
Devereux Adolescent Behavior Rating Scale (Spivak, Spotte & Haines, 1967)
Developmental Therapy - Objective Rating Form
Jesness Behavior Checklist (Jesness) ages 13-20
Revised Behavior Problem Checklist (Quay & Peterson, 1983)
Walker Problem Identification Checklist (Walker, 1975) grades 4-6

SELF CONCEPT

Piers-Harris Children's Self Concept Scale (Piers & Harris, 1969)
Inferred Self Concept Inventory (McDonell, 1973)
The assessment needs of infants and young children are often very different from those of the school-aged child. Many variables must be carefully considered in order to plan and adjust appropriate courses of assessment. The strengths and needs of the individual young child and the family must be addressed.

Because young children develop a great deal in a short period of time, they may need to be assessed more frequently than older children. The process should also include less formal measurements of changes in behavior and learning as part of the ongoing educational process.

An infant’s primary environment is often the home, a hospital or a day care setting. The people most involved with the child on a daily basis are, in addition to parents and other family members, day care and preschool providers. Therefore, an assessment would likely be most appropriately carried out in this setting and would include essential information provided by parents and other active caregivers.

The selection of instruments to be used in the assessment, i.e., standardized tests, developmental scales, observation and informal tools, must take into consideration many elements — the area of development being tested, where the assessment takes place, cultural background, primary language, communication skills, and any condition that might have an impact on the child’s performance (such as a physical disability). In addition, assessment methods should follow standards of good practice and state eligibility criteria.

The following pages of tables titled “Assessment: Instruments and Procedures for Assessing Young Children” were developed by the Special Education Section of the Minnesota Department of Education in 1985 and are reprinted with their permission.

The summary tables reprinted here are followed in the full state department publication by individual descriptions of each instrument including discussion/concerns and references. A second manual, “Observing the Behavior of Young Children and Assessing the Environments in Which They Learn,” is also available.

Inquiries on obtaining these publications should be directed to the Minnesota Curriculum Services Center, 3554 White Bear Avenue, White Bear Lake, MN 55110; (612) 770-3943 or 800-652-9024.
## INSTRUMENTS AND PROCEDURES FOR ASSESSING YOUNG CHILDREN*

<table>
<thead>
<tr>
<th>Name of Test</th>
<th>Age Range</th>
<th>Test</th>
<th>Screening</th>
<th>Diagnostic Programming</th>
<th>Motor</th>
<th>Common Language</th>
<th>Speech</th>
<th>Self Help</th>
<th>Perception</th>
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## INSTRUMENTS AND PROCEDURES FOR ASSESSING YOUNG CHILDREN*

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# INSTRUMENTS AND PROCEDURES FOR ASSESSING YOUNG CHILDREN

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<td>Oliver</td>
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<td>Non-verbal or minimally verbal</td>
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<tr>
<td>Peabody Picture Vocabulary Test (PPVT-R)</td>
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<tr>
<td>Personality Inventory for Children (PIC)</td>
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<td>Photo Articulation Test (PAT)</td>
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<tr>
<td>Pictorial Test of Intelligence</td>
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<tr>
<td>Portage Guide to Early Education (Revised)</td>
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<tr>
<td>Preschool Attainment Record, Research Edition</td>
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### INSTRUMENTS AND PROCEDURES FOR ASSESSING YOUNG CHILDREN*  

<table>
<thead>
<tr>
<th>Name of Test</th>
<th>Age Range</th>
<th>Norm-Referenced</th>
<th>Criterion-Referenced</th>
<th>Screening</th>
<th>Diagnostic</th>
<th>Programming</th>
<th>Motor</th>
<th>Cognition</th>
<th>Language</th>
<th>Speech</th>
<th>Sensory</th>
<th>Social Behavior</th>
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<th>Standardization</th>
<th>Reliability</th>
<th>Validity</th>
<th>Special Populations</th>
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<td>X X X X X X</td>
<td>Multiply handicapped cerebral palsy</td>
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<tr>
<td>Psychoeducational Evaluation of the Preschool Child</td>
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<td>Visually impaired</td>
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<tr>
<td>Receptive-Expressive Emergent Language Scale (REEL)</td>
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<td>Skills Inventory - Oregon Project</td>
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### INSTRUMENTS AND PROCEDURES FOR ASSESSING YOUNG CHILDREN*

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<tr>
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<td>Test of Early Language Development (TELD)</td>
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<td>Test of Early Socioemotional Development (TOESD)</td>
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<td>Uniform Performance Assessment System (UPAS)</td>
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<td>Verbal Language Development Scale (VLDS)</td>
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<td>Vineland Adaptive Behavior Scales</td>
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<td>Vocabulary Comprehension Scale</td>
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<td>Vulpe Assessment Battery (VAB)</td>
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<td>Wechsler Preschool &amp; Primary Scale of Intelligence (WPPSI)</td>
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<tr>
<td>Woodcock-Johnson Psycho-educational Battery (WJPEB)</td>
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VOCATIONAL EVALUATION

Before reviewing the type of vocational assessments commonly used in schools, it would be helpful to understand the purpose of a vocational assessment. Two terms that have often been used interchangeably are vocational evaluation and vocational assessment; however, they mean different things.

A vocational assessment is an ongoing process used to identify an individual's strengths or limitations that enhance or interfere with vocational development. Vocational assessments should provide insight into an individual's interests, aptitudes, learning style, and the accommodation needed to be successful on a job or in a vocational training program. The goal should be to screen students into, not out of, vocational education and training programs.

A vocational evaluation is an intensive time-limited process that uses real (community based) or simulated work as a means of assessing an individual's skills and abilities.

To ensure that the results of a vocational evaluation or assessment are useful and a good reflection of an individual's abilities, it is important that parents and professionals see to it that the following questions are addressed:

• Given my son's/daughter's disabilities, are the assessment tools and methods that will be used appropriate?

  This is a critical question because often assessment tools have been developed with certain populations in mind, and are not considered to be reliable or valid for use with all students. For example, if a test has been designed for individuals able to read at a certain level, understand and follow multi-step directions, maintain attention for a period of time or use specific motor skills, then for those students who lack these skills such a test would not provide a good measure of their ability. Prior to your son/daughter's vocational testing, discuss with the evaluator any concerns you may have, how the test will be administered, for whom it was designed, and the evaluator's background and experience.

• What information are we hoping to obtain from the evaluation/assessment?

  When planning for an evaluation/assessment, it is important to identify what you want to know as a result of the process. By determining what your needs are ahead of time, you can better guide and individualize a vocational evaluation/assessment, thus attaining results more specific to your planning needs. For example, it may be important to learn if your son/daughter is interested in a particular type of work or what specific skills and abilities he or she has. Or, you may wish to know more about your child's learning style or the types of accommodations he or she would need to be successful on a job.

While addressing the previous two questions is critical for a productive evaluation/assessment to occur, other issues such as the student's role in planning and how test results will be shared with parents, students and professionals should also be discussed prior to conducting a vocational evaluation or assessment.

The approach to vocational assessment is rapidly changing. Many schools are adopting an integrated assessment process which directly ties assessment to instruction and can provide opportunities for situational assessment. The changes also provide better accommodations for the developmental levels of students, the local labor market and available vocational training opportunities.

Curriculum-Based Vocational Assessment (CBVA) is being used by many school districts around the country as an alternative to the traditional methods of vocational evaluation. In this process, data is collected in the areas of work related behaviors and specific learner outcomes within a variety of environments including the classroom and the community. The information is integrated into the IEP planning process and is used in making transition and vocational programming decisions. The concept of CBVA involves consistent performance monitoring within vocational courses and training programs.

The following list of vocational evaluation tools represents some of the traditional tests that have been used for many years. Since they are norm-referenced tests (standardized, formal procedures for administering, timing and scoring), parents may want to ask specific questions about the usefulness and limitations for their son/daughter with disabilities. It is important to monitor whether or not the information gained from any of these tests is ever applied toward educational programming decisions or if the assessment data is included in the IEP.
<table>
<thead>
<tr>
<th>NAME</th>
<th>TYPE</th>
<th>METHOD</th>
<th>AGE/POPULATION</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apticom Vocational Research Institute</td>
<td>Interest and Aptitude</td>
<td>Up to five at a time</td>
<td>Grade 9 to adults</td>
<td>Similar to the GATB test (described below), it measures 15 components, including language and math, and prints out a computerized 25 to 30-page summary listing occupations and a range of skills. Reading level approximately grade 4 - 5.</td>
</tr>
<tr>
<td>Career Ability Placement Survey (CAPS). This survey is a component of the California Occupational Preference System (COPS) Edits, Inc. P.O. Box 7234 San Diego, CA 92107 (619) 222-1666</td>
<td>Aptitude</td>
<td>Paper and pencil format</td>
<td>Jr. high and above</td>
<td>Measures aptitudes related to entry requirement of jobs in 14 occupational clusters; good reading skills required; 8th grade reading level.</td>
</tr>
<tr>
<td>Career Assessment Inventory (CAI) National Computer Systems, Inc. P.O. Box B 1416 Minneapolis, MN 55440</td>
<td>Interest</td>
<td>Paper and pencil, self-administered, or used with groups</td>
<td>8th grade and over, non college bound</td>
<td>Measures vocational interests related to Holland's occupational type theory; requires 6th grade reading level.</td>
</tr>
<tr>
<td>Career Planning System Conover Company Terry Schmitz (owner) P.O. Box 155 Omro, WI 54963 (414) 685-5707</td>
<td>Interest</td>
<td>Micro computer, individual, or group administration. Audiovisual format available</td>
<td>High risk and/or special needs students, Jr. high through young adult</td>
<td>Allows individual to identify his/her level of interest in a variety of work related activities and environments. Written at grade 3.5 reading level. Can be administered to non-readers using the audiovisual format.</td>
</tr>
<tr>
<td>NAME</td>
<td>TYPE</td>
<td>METHOD</td>
<td>AGE/POPULATION</td>
<td>PURPOSE</td>
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<td>General Aptitude Test Battery (GATB)</td>
<td>Aptitude</td>
<td>Multiple choice and hands-on, individual or group</td>
<td>Grade 9 and above.</td>
<td>Measures nine aptitude areas:</td>
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<td>Nonreading Aptitude Test Battery (NATB)</td>
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<td>non-reading counterpart)</td>
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<td>• verbal skills</td>
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<td>Vocational Research Institute</td>
<td></td>
<td></td>
<td></td>
<td>• numerical skills</td>
</tr>
<tr>
<td>2100 Arch Street</td>
<td></td>
<td></td>
<td></td>
<td>• form perception</td>
</tr>
<tr>
<td>Philadelphia, PA 19103</td>
<td></td>
<td></td>
<td></td>
<td>• clerical perception</td>
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<tr>
<td>Licensed to administer:</td>
<td></td>
<td></td>
<td></td>
<td>• motor coordination</td>
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<tr>
<td>Department of Jobs and Training</td>
<td></td>
<td></td>
<td></td>
<td>• finger dexterity</td>
</tr>
<tr>
<td>390 N. Robert Street</td>
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<td></td>
<td></td>
<td>• manual dexterity</td>
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<tr>
<td>St. Paul, MN 55101</td>
<td></td>
<td></td>
<td></td>
<td>Requires 6th grade reading level.</td>
</tr>
<tr>
<td>McCarron Dail Work Evaluation System</td>
<td>Aptitude</td>
<td>Individual, pencil and paper as well as hands on</td>
<td>Youth and adults with learning disabilities, mental retardation or mental illness</td>
<td>Measures:</td>
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<tr>
<td>P.O. Box 450628</td>
<td></td>
<td></td>
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<td>• verbal cognitive skills</td>
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<tr>
<td>Dallas, TX 75245</td>
<td></td>
<td></td>
<td></td>
<td>• sensory and motor skills</td>
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<tr>
<td>(214) 247-5945</td>
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<td>• emotional stability</td>
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<tr>
<td>Micro Computer Evaluation and Screening</td>
<td>Vocational interest and skills screened</td>
<td>Individually or group administered, using a microcomputer and work samples</td>
<td>Jr. high and above</td>
<td>Integrating coping skills through the use of:</td>
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<td>Assessment (MESA)</td>
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<td>Valpar International Corporation</td>
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<td>• behavior reading scale</td>
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<td>P.O. Box 5767</td>
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<td>• manual dexterity test</td>
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<tr>
<td>Tucson, AZ 85703 5767</td>
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<td>Measures:</td>
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<td>Pictorial Inventory of Careers (PIC)</td>
<td>Interest</td>
<td>Individual or group, pictorial format:</td>
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<td>• physical capabilities</td>
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<td>Talent Assessment, Inc.</td>
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<td>• mobility skills</td>
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<tr>
<td>P.O. Box 5087</td>
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<td></td>
<td>• vocational interests awareness</td>
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<tr>
<td>Jacksonville, FL 32247</td>
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<td></td>
<td></td>
<td>Assessment of interest related to 17 occupational clusters, and 11 categories of work environments. No reading skills required.</td>
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</table>
### VOCATIONAL ASSESSMENT/EVALUATION TESTS

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<th>METHOD</th>
<th>AGE/POPULATION</th>
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<td><strong>Singer Vocational Evaluation System (VES)</strong> &lt;br&gt;New Concept Corporation &lt;br&gt;1802 N. Division Street &lt;br&gt;Morris, IL 60450</td>
<td>Aptitude, interest and work tolerance</td>
<td>Hands-on, individually administered, an audiovisual machine is used to present programmed instructions</td>
<td>17-30 years old special needs population</td>
<td>Assesses vocational aptitude, interests and work tolerance in 24 work sample stations, which represent the most common jobs found in the Dictionary of Occupational Titles</td>
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<td><strong>Talent Assessment Program (TAP)</strong> &lt;br&gt;P.O. Box 5087 &lt;br&gt;Jacksonville, FL 32247-5087</td>
<td>Functional vocational aptitude</td>
<td>Individual or small group. Hands-on, no writing or reading required.</td>
<td>8th grade and over</td>
<td>Assessment of: &lt;br&gt;• dexterity (visual and tactile) &lt;br&gt;• discrimination &lt;br&gt;• memory related to job demands in technical, industrial and service occupations.</td>
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<td><strong>VALPAR Component Work Sample System</strong> &lt;br&gt;VALPAR International Corporation &lt;br&gt;P.O. Box 5767 &lt;br&gt;Tucson, AZ 85703-5767</td>
<td>Vocational and functional skills</td>
<td>Hands-on</td>
<td>Jr. high and above</td>
<td>Work samples are used to assess a range of general work characteristics.</td>
</tr>
<tr>
<td><strong>Wide Range Interest-Opinion Test (WRIOT)</strong> &lt;br&gt;Jastak Associates &lt;br&gt;1526 Gilpin Avenue &lt;br&gt;Huntington, DE 19805</td>
<td>Vocational interest and attitude</td>
<td>Grades K - 12 and adults</td>
<td>Individual or group, pictorial format</td>
<td>Assessment of interest and attitudes related to 18 occupational interest clusters and 8 attitude clusters.</td>
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</table>

Hammill, D.D.; Brown, Linda; Bryant, B.R. *Consumers Guide to Tests in Print*. Available from Pro Ed, 8700 Shoal Creek Boulevard, Austin, TX 78758.


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<th>Test</th>
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<tr>
<td>Achenbach's Child Behavior Checklist</td>
<td>Personality</td>
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<td>Adaptive Behavior Inventory (ABI)</td>
<td>Adaptive Behavior</td>
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<td>Adaptive Behavior Inventory (API)</td>
<td>Young Children</td>
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<td>American Association on Mental Deficiency</td>
<td>AAMD Adaptive Behavior Scale for Children &amp; Adults (AAMD-ABS)</td>
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<td>American Association on Mental Deficiency</td>
<td>AAMD Adaptive Behavior Scale, School Edition (AAMD ABS-SE)</td>
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<td>Apticom</td>
<td>Vocational</td>
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<td>Arizona Articulation Proficiency Scale-Revised (AAPS)</td>
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<td>Arthur Adaptation of the Leiter International Performance (AALIPS)</td>
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<td>Assessment in Infancy, Ordinal Scales of Psychological Development</td>
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PACER Center, Inc. (Parent Advocacy Coalition for Educational Rights) is a training and information center for parents of children with disabilities. As a coalition of Minnesota disability organizations, it was founded on the concept of Parents Helping Parents. PACER strives to improve and expand opportunities that enhance the quality of life for children and young adults with disabilities and their families.

PACER projects include:
- Workshops and programs on many topics related to children and young adults with disabilities:
  - Early childhood intervention
  - Educational surrogate parenting
  - Transition services
  - Supported employment
  - Emotional/behavioral disorders (E/BD)
  - Health/medical services
  - Underrepresented parents
- COUNT ME IN disability awareness puppet programs for school and community groups
- LET'S PREVENT ABUSE puppet program for schools and in-service training for professionals
- Computer Resource Center for children and young adults with disabilities
- Individual assistance to parents by telephone or in person
- Technical assistance services to parent training programs in other states
- Information to parents through newsletters, booklets, extensive written materials, videotapes and other resources

PACER Center celebrated its 10th anniversary in 1988. Staffed primarily by parents of children with disabilities, or by persons with disabilities themselves, it is funded through grants from the Division of Personnel Preparation, U.S. Department of Education, various foundations, corporations, individuals and other sources. PACER is a nonprofit, tax-exempt organization, and contributions to it are tax-deductible.

Current members of the PACER coalition are:

- Alliance for the Mentally Ill of Minnesota, Inc.
- Association for Retarded Citizens Minnesota
- Epilepsy Foundation of Minnesota
- Mental Health Association of Minnesota
- Metropolitan Association for the Hearing Impaired
- MINCEP Epilepsy Care P.A.
- Minnesota Association for Children and Adults with Learning Disabilities
- Minnesota Coalition on Handicap Issues
- Minnesota Foundation for Better Hearing and Speech
- Minnesota Head Injury Association
- Minnesota Speech-Language-Hearing Association
- Minnesota State Council on Disability
- Muscular Dystrophy Association
- National Federation of the Blind of Minnesota, Inc.
- Spina Bifida Association of Minnesota
- Twin Cities Down Syndrome Association
- Twin Cities Society for Children and Adults with Autism
- United Cerebral Palsy of Minnesota, Inc.