



DOC
TYPE 3579

DIVISION OF SPECIAL EDUCATION

PRINT STUDENT'S NAME: (LAST) _____ (FIRST) _____ (M.I.) _____			DATE (MM/DD/YY)	_____
			STUDENT ID. NO.	_____

**BRIGANCE INVENTORY OF EARLY DEVELOPMENT
ASSESSMENT SUMMARY**

D.O.B.: _____ HOME SCHOOL: _____

YEARS

5 _____

4 _____

3 _____

2 _____

1 _____

	GROSS MOTOR	FINE MOTOR	SELF-HELP	SPEECH & LANGUAGE	GENERAL KNOWLEDGE & COMPREHENSION
Areas:					
	Range of Assessment Scores in Years and Months:				
	<u>Initial</u>	(Blue)	<u>Second</u>	(Green)	<u>Third</u> (Black)
	<u>Fourth</u>	(Purple)			
Gross Motor Skills	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()
Fine Motor Skills	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()
Self-Help Skills	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()
Speech & Language	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()
General Knowledge & Comprehension	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()
Chronological Age (Red)	_____ ()	_____ ()	_____ ()	_____ ()	_____ ()

() Initial column - months delayed from chronological age.
 () Second-fourth column - progress made in months since prior assessment.

Evaluator _____ Initial Date _____

Evaluator _____ Second Date _____

Evaluator _____ Third Date _____

Evaluator _____ Fourth Date _____