

# Dyslexia Screeners

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**DISCLAIMER:** This screener is *NOT* a diagnostic test. Its purpose is to help you identify any red flags that may be associated with dyslexia. Further testing by a professional is needed to truly diagnose dyslexia.

TWO dyslexia screeners are included in this pack. The **parent screener starts on page 3** and the **teacher screener begins on page 9**.

If the child goes to school, both the parent *and* teacher perspectives are helpful. If the child is homeschooled, consider giving a screener to a teacher in a co-op or a relative/friend who knows and has taught or seen your child in an educational setting.

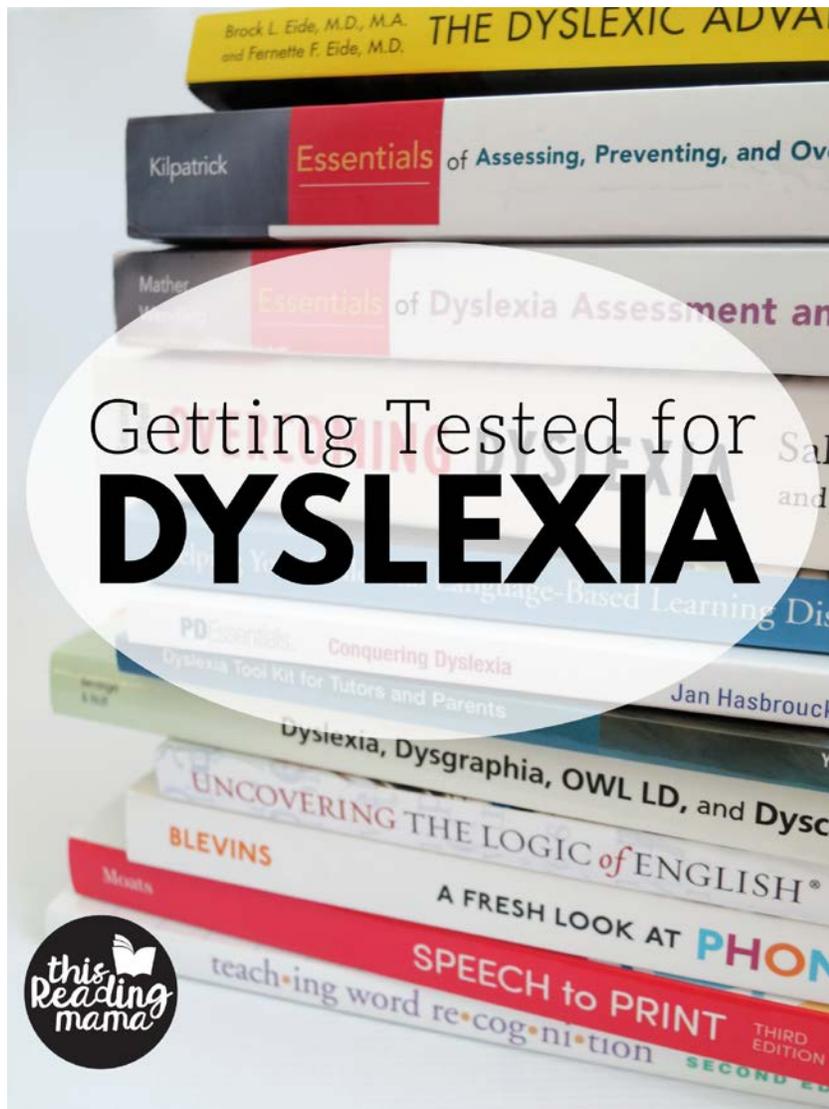
The image shows two overlapping screenshots of dyslexia screening forms. The top form is the 'Parent Dyslexia Screener' and the bottom form is the 'Teacher Dyslexia Screener'. Both forms have a 'Speech' section and an 'Early Learning Skills' section. Each section contains several statements with checkboxes for 'Yes', 'Sometimes', and 'No'. The 'Speech' section includes statements about speech delays, sound/syllable reversal, and articulation. The 'Early Learning Skills' section includes statements about learning shapes, colors, letter names, and motor skills. Both forms also have a space for the child's name and date, and a footer with the website 'www.thisreadingmama.com'.

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# Learn MORE about Getting Tested for Dyslexia



Visit my blog post [HERE!](#)

# Parent Dyslexia Screener

**DISCLAIMER:** This parent screener is *NOT* a diagnostic test. Its purpose is to help you identify any red flags that may be associated with dyslexia. Further testing by a professional is needed to truly diagnose dyslexia.

## **How to “Grade” the Questionnaire:**

If your child has:

1- three or more “Yes” checks in most of the categories on this screener

**AND**

2- a close relative with reading difficulties and/or dyslexia,

I *highly* encourage you to have your child further tested for dyslexia.

**LEARN MORE** about testing in my blog article, [\*Getting Tested for Dyslexia.\*](#)

# Parent Dyslexia Screener

This parent screener is designed for the parent(s) of a child in your K-5 classroom. Homeschooling parents can also use this screener to identify some of the red flags associated with dyslexia.

*This is NOT a diagnostic test.*

Check "Yes," "Sometimes," or "No" beside each question.

## Speech

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

	Yes	Sometimes	No
My child had/has speech delays. (Speech came after or fell behind the benchmarks for "normal.")	<input type="checkbox"/>		<input type="checkbox"/>
My child mixed/mixes up sounds or syllables in words. (Example: Says "pack" instead of "cap.")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child stutters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child pauses when speaking, as if trying to recall words or how to say words.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has difficulty expressing his/her ideas clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_/\_\_\_\_\_

## Early Learning Skills

	Yes	Sometimes	No
My child had/has difficulty learning shapes and colors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has difficulty learning letter names and sounds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggled/struggles with rote memory sequencing like the days of the week, the alphabet, or counting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has trouble recognizing the letters in his/her name.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has delays with fine motor skills such as color or writing.	<input type="checkbox"/>		<input type="checkbox"/>

# of Yes: \_\_\_\_\_/\_\_\_\_\_

## Understanding Sounds in Words

	Yes	Sometimes	No
My child had/has difficulty learning common nursery rhymes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has difficulty recognizing when two or more words rhyme. ( <i>cat, hat, sat, fat, etc.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggled/struggles to create rhyming words. (Example: What rhymes with <i>cat</i> ?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggled/struggles to break words into their separate syllables. (Example: <i>rainbow = rain / bow</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggled/struggles to blend syllables together to form a word. (Example: <i>row / boat = rowboat</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has a hard knowing if two words start or end with the same sound. (Example: Do <i>pig</i> and <i>pen</i> both start with the same sound?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggled/struggles to break a word into its individual sounds. (Example: <i>hat = /h/ /a/ /t/</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child had/has a hard time blending sounds to form words. (Example: <i>/d/ /i/ /g/ = dig.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_/\_\_\_\_

## Life Skills

	Yes	Sometimes	No
My child is easily distracted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has a messy bedroom, workspace, or school desk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has trouble keeping up with things. / My child loses things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Life Skills Continued

	Yes	Sometimes	No
My child has trouble remembering people's names.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has a poor sense of the passage of time. (Example: (S)he misjudges how long an activity will take.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has difficulty following 2- or 3-step directions. (Example: Go upstairs, brush your teeth, then put on your socks.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_ / \_\_\_\_

# Reading Behaviors & Skills

	Yes	Sometimes	No
My child avoids reading but likes being read to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family has a history of reading problems. (Perhaps a grandparent, parent, or sibling struggles to read.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child reads words "backwards." (Example: <i>saw</i> for <i>was</i> .)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child uses the picture or the meaning of the sentence to figure out unknown words instead of trying to sound out words.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child skips over or misreads small words such as <i>it</i> , <i>of</i> , or <i>at</i> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child makes reading mistakes that have little to no connection to the letter sounds in the word. (Example: <i>ship</i> might be read as <i>dog</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to remember the reading strategies we've worked. (Example: sounding out words)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child reads with very little expression. (Reading sounds choppy and has little to no emotion or inflection.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Reading Behaviors & Skills

	Yes	Sometimes	No
My child will misread a word the next time (s)he sees it, even if (s)he sounded the word out correctly or was told the word the first time it appeared in the book.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to remember what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has difficulty understanding what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has difficulty retelling what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_/\_\_\_\_\_

## Writing Behaviors & Skills

	Yes	Sometimes	No
My child has slow or messy handwriting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child makes spelling errors that have very little connection to the letter sounds in the word. (Example: <i>cat</i> might be spelled TIP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child reverses letters. (Example: <i>b/d, p/q</i> ) Note: If your child is in Kindergarten or first grade, this is common! You may still check a box for this category.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to sound through words to spell them. (Example: <i>cat</i> = /k/ /a/ /t/)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child misspells common words we've worked on together. (Example: <i>the, and, etc.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to copy words from a book or other text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_/\_\_\_\_\_

## Math Behavior & Skills\*

\*Although these are math skills, dyslexia and dyscalculia (a difficulty with math concepts) are related to one another. In other words, a child with dyslexia tendencies may also have trouble with math concepts like the ones on this questionnaire.

	Yes	Sometimes	No
My child has trouble skip counting. (Example: 2, 4, 6, 8, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has trouble memorizing math facts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to tell time using a clock that has hands (analogue clock).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child has difficulties counting on or counting back from a number that isn't one. (Example: 10, 11, 12...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child struggles to understand the logic behind math. (Example: when to subtract and when to add)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_ / \_\_\_\_\_

### “Grading” this Screener

If your child has three or more “Yes” checks in most of the categories on this screener AND a close relative with reading difficulties and/or dyslexia, your child may need to be further tested by a professional for dyslexia.\*

**\*DISCLAIMER:** This parent screener is *NOT* a diagnostic test. Its purpose is to help you identify red flags that may be associated with dyslexia. Further testing by a professional is needed to truly diagnose dyslexia.

**LEARN MORE** about testing for dyslexia at my blog post <https://thisreadingmama.com/getting-tested-for-dyslexia/>

# Teacher

## Dyslexia Screener

**DISCLAIMER**: This screener is *NOT* a diagnostic test. Its purpose is to help you identify any red flags that may be associated with dyslexia. Further testing by a professional is needed to truly diagnose dyslexia.

### **How to “Grade” the Questionnaire:**

If your learner has:

1- three or more “Yes” checks in most of the categories on this screener

**AND**

2- a close relative with reading difficulties and/or dyslexia,

I *highly* encourage you to have the child further tested for dyslexia.

**LEARN MORE** about testing in my blog article, [Getting Tested for Dyslexia](#).

# Teacher Dyslexia Screener

This teacher screener is designed for a K-5 classroom teacher to help identify some of the red flags associated with dyslexia. *This is NOT a diagnostic test.*

Check "Yes," "Sometimes," or "No" beside each question.

## Speech

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

	Yes	Sometimes	No
The learner had speech delays. (Speech came after or fell behind the benchmarks for "normal.")	<input type="checkbox"/>		<input type="checkbox"/>
The learner mixes up sounds or syllables in words. (Example: Says "pack" instead of "cap.")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner stutters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner pauses when speaking, as if trying to recall words or how to say words.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulty expressing his/her ideas clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_/\_\_\_\_

## Early Learning Skills

	Yes	Sometimes	No
The learner had/has difficulty learning shapes and colors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner had/has difficulty learning letter names and sounds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggled/struggles with rote memory sequencing like the days of the week, the alphabet, or counting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner had/has trouble recognizing the letters in his/her name.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner had/has delays with fine motor skills such as color or writing.	<input type="checkbox"/>		<input type="checkbox"/>

# of Yes: \_\_\_\_/\_\_\_\_

## Understanding Sounds in Words

	Yes	Sometimes	No
The learner has difficulty learning common nursery rhymes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulty recognizing when two or more words rhyme. ( <i>cat, hat, sat, fat, etc.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to create rhyming words. (Example: What rhymes with <i>cat</i> ?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to break words into their separate syllables. (Example: <i>rainbow = rain / bow</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to blend syllables together to form a word. (Example: <i>row / boat = rowboat</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has a hard knowing if two words start or end with the same phoneme. (Example: Do <i>pig</i> and <i>pen</i> both start with the same sound?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to break a word into its individual phonemes. (Example: <i>hat = /h/ /a/ /t/</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has a hard time blending phonemes to form words. (Example: <i>/d/ /i/ /g/ = dig.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_/\_\_\_\_

## Life Skills

	Yes	Sometimes	No
The learner is easily distracted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has a messy cubby, workspace, or school desk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has trouble keeping up with things. / (S)he loses things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Life Skills Continued

	Yes	Sometimes	No
The learner has trouble remembering people's names.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has a poor sense of the passage of time. (Example: (S)he misjudges how long an activity will take.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulty following 2- or 3-step directions. (Example: Get out a piece of paper, write your name on the top, and number your paper 1-10.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_ / \_\_\_\_

## Reading Behaviors & Skills

	Yes	Sometimes	No
The learner avoids reading but likes listening to you read aloud.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner's family has a history of reading problems. (Grandparent, parent, or sibling struggles to read.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner reads words "backwards." (Example: <i>saw</i> for <i>was</i> .)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner uses the picture or the meaning of the sentence to figure out unknown words instead of trying to sound out words.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner skips over or misreads small words such as <i>it</i> , <i>of</i> , or <i>at</i> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner makes reading mistakes that have little to no connection to the letter sounds in the word. (Example: <i>ship</i> might be read as <i>dog</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to remember the reading strategies we've worked. (Example: sounding out words)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner reads with very little expression. (Reading sounds choppy and has little to no emotion or inflection.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Reading Behaviors & Skills

	Yes	Sometimes	No
The learner will misread a word the next time (s)he sees it, even if (s)he sounded the word out correctly or was told the word the first time it appeared in the book.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to remember what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulty understanding what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulty retelling what (s)he has read.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_ / \_\_\_\_\_

## Writing Behaviors & Skills

	Yes	Sometimes	No
The learner has slow or messy handwriting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner makes spelling errors that have very little connection to the letter sounds in the word. (Example: <i>cat</i> might be spelled TIP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner reverses letters. (Example: <i>b/d, p/q</i> ) Note: If your child is in Kindergarten or first grade, this is common! You may still check a box for this category.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to sound through words to spell them. (Example: <i>cat</i> = /k/ /a/ /t/)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner misspells common words we've already worked on together. (Example: <i>the, and, etc.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to copy words from a book or other text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_ / \_\_\_\_\_

## Math Behavior & Skills\*

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	Yes	Sometimes	No
The learner has trouble skip counting. (Example: 2, 4, 6, 8, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has trouble memorizing math facts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to tell time using an analogue clock.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner has difficulties counting on or counting back from a number that isn't one. (Example: 10, 11, 12...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The learner struggles to understand the logic behind math. (Example: when to subtract and when to add)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# of Yes: \_\_\_\_\_/\_\_\_\_\_

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If the learner has three or more “Yes” checks in most of the categories on this screener AND a close relative with reading difficulties and/or dyslexia, the child may need to be further tested by a professional for dyslexia.\*

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