

Preschool Social-Emotional Behavior Screening Sheet

Child's Name:

Date of Birth:

Teacher/Observer:

Date:

Screening Items (Mark if observed: Yes / No)

Social-Emotional Behavior	Yes	No	Comments
Relates well to adults			
Relates well to peers			
Shows empathy (understanding others' feelings)			
Expresses own feelings appropriately			
Handles transitions/routine changes			
Manages frustration (self-control)			
Accepts limits/refusals			
Participates in group activities			
Separates easily from parent/caregiver			
Follows simple directions			

Additional Notes

Recommended Action

