

Critical Social Skills Questionnaire  
Parent Form, Ages 3-9

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Please circle the response that best describes the way your child has been with playmates his/her age over the **PAST TWO WEEKS**. Use the following scale:  
**1=never or almost never, 2=hardly ever, 3=sometimes, 4=most of the time, 5=always or almost always**

Does your child...

1. Share toys without prompting?

1                      2                      3                      4                      5

Never

Always

2. Take turns during games?

1                      2                      3                      4                      5

Never

Always

3. Make suggestions rather than demands during play?

1                      2                      3                      4                      5

Never

Always

4. Ask questions to determine the wants/needs of others during play?

1                      2                      3                      4                      5

Never

Always

5. Obey game rules?

1                      2                      3                      4                      5

Never

Always

6. Really listen to others' ideas during play?

1                      2                      3                      4                      5

Never

Always

7. Have a two-way conversation (get information and give information) during play with peers?

1                      2                      3                      4                      5

Never

Always

8. Grab toys from others?

1                      2                      3                      4                      5

Never

Always

