

Child ID _____

Letter Name form _____

Age _____

Date _____

Letter Name Knowledge

Materials: Letter stimuli in binder. Be sure to use correct form. Make sure that you choose a form that does NOT include the first letter of the child's name.

Instructions: Present each letter one at a time. Say, "What letter is this?" Examiner may reprompt with "What is the name of this letter?" Do not correct child if response is not a letter.

Scoring: Mark 1 if child gives correct letter name. Mark 0 if child gives incorrect letter name or no answer.

Form 1

1. **o** _____
2. **s** _____
3. **w** _____
4. **F** _____
5. **e** _____
6. **m** _____
7. **u** _____
8. **V** _____

Form 2

1. **B** _____
2. **E** _____
3. **P** _____
4. **Y** _____
5. **I** _____
6. **U** _____
7. **v** _____
8. **d** _____

Form 3

1. **X** _____
2. **k** _____
3. **D** _____
4. **J** _____
5. **N** _____
6. **p** _____
7. **a** _____
8. **t** _____

Form 4

1. **A** _____
2. **c** _____
3. **H** _____
4. **G** _____
5. **z** _____
6. **r** _____
7. **j** _____
8. **q** _____

Form 5

1. **S** _____
2. **M** _____
3. **W** _____
4. **L** _____
5. **i** _____
6. **f** _____
7. **n** _____
8. **g** _____

Form 6

1. **R** _____
2. **K** _____
3. **T** _____
4. **Z** _____
5. **Q** _____
6. **y** _____
7. **h** _____
8. **b** _____