

Ages & Stages Questionnaire - Social/Emotional (ASQ-SE-2) - KDHE

SCREENING INFORMATION

Date of Activity: ____/____/____

Which Child was involved (Client Name):

Child's age (in months) at time of measurement:

Which Caregiver was involved:

If someone other than a caregiver completed the
screen, please list their name:

Relationship to child: _____

Provider's Name: _____

ASQ-3 Screening Month: (select one)

- 2
- 6
- 12
- 18
- 24
- 30
- 36
- 48
- 60

SCORING INFORMATION

ASQ-SE-2 Score: _____